

AC 4431

Library

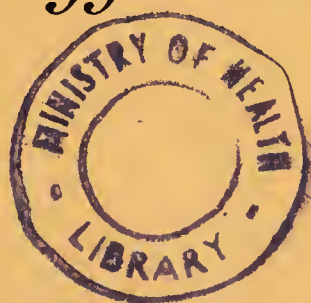
II

# WILTSHIRE COUNTY COUNCIL

## *Annual Report*

OF THE

## *Medical Officer of Health*



FOR THE YEAR

*1963*

Being the statutory report required to be made by the County Medical Officer of Health under  
the Public Health Officers Regulations, 1959



WILTSHIRE COUNTY COUNCIL

---

*Annual Report*

OF THE

*Medical Officer of Health*

FOR THE YEAR

*1963*

Being the statutory report required to be made by the County Medical Officer of Health under  
the Public Health Officers Regulations, 1959



Digitized by the Internet Archive  
in 2018 with funding from  
Wellcome Library

<https://archive.org/details/b30280308>



## Index

[illegible]

## *Foreword*

The work of health departments of local health authorities is likely in the future to have an increasing emphasis upon the discovery and observation of children who are particularly at risk of becoming physically or mentally handicapped because of factors operating before, during or after birth, so as to prevent disease and ensure the earliest possible help for those in whom handicaps develop. It should be possible in future reports to give a more detailed appraisal of the results being obtained from the "at risk" register which is now being kept.

The same principle is capable of being applied to adults also, and this may prove to be another development of public health work.

This year new graphs are shown of causes of death in Wiltshire since 1950. Among other things they demonstrate that the County has shared in the increase in deaths attributed to coronary disease, and that fatalities from road accidents (which obtain so much more publicity) are, though serious enough, fewer in number than those from other accidents, many of which happen in the home and are preventable.

Although infectious diseases are no longer among the main causes of death, they remain potentially dangerous and we cannot afford to relax measures for immunisation or for personal and environmental hygiene. It is a cause for concern that the level of poliomyelitis immunisation is unsatisfactory, especially in babies, and that immunisation against diphtheria and whooping cough is only just at the level which can be regarded as at all adequate, and it is hoped that parents will support the efforts being made to produce improvements and will give their consent readily.

Progress has been maintained during the year in the provision of personal health services, as is shown in the various sections of the report. There are, however, too many unnecessary obstacles to the development of the services and particularly in the approval and acquisition of sites for capital development. It seems not always to be realised that training centres for the mentally subnormal, maternity and child welfare centres, ambulance stations and mental health hostels are necessary services for the people and an important part of the national health service and that to raise every possible objection to the use of land for such purposes may not be for the public benefit.

It is most regrettable that no progress has been made towards arrangements in Wiltshire for the fluoridation of water, which would very substantially reduce dental decay in children. There is probably no public health measure which has been the subject of more careful and convincing prior demonstration of its safety and effectiveness, or of more confused and misleading propaganda by those who for some reason best known to themselves are opposed to it. It is high time that the very strong case for fluoridation was translated into action, and the Corporation of Birmingham has now shown the way. Those who still feel that weight should be given to anti-fluoridation propaganda as against scientific evidence and informed opinion may perhaps be convinced by the judgement in the High Court of Dublin delivered on the 31st July, 1963, following the hearing lasting 65 days of a case in which a resident of Dublin challenged the validity of the Act passed in Eire which provides that every health authority is to arrange for the fluoridation of water. The

hearing and the judgement examined minutely the questions both of safety and of the violation of the personal rights of the citizen which it is sometimes suggested would result from fluoridation, and the Court's judgement, which was upheld on appeal, is a strong vindication of fluoridation made by an independent legal tribunal. Another judgement (in the Supreme Court in Wellington, New Zealand) concluded that it was in the highest degree desirable that fluoridation of water should be developed.

Co-operation between the different branches of the national health service in Wiltshire continues to increase and it is a pleasure to acknowledge the constant help of family doctors and the hospital service.

Voluntary organisations and individuals contribute much to the health services for which the County Council is responsible. Voluntary work in clinics, service with the County Car Pool or in voluntary ambulance detachments, the distribution of welfare foods and other activities are of great assistance.

During 1963 the staff of the Health Department carried out with great willingness and efficiency a large amount of extra work in the development of the services as well as the ordinary work of the professional, field and administrative and clerical staff, and I should like to express my appreciation and thanks.

I am grateful also to the chief officers and staff of other departments of the County Council for their unfailing assistance.

C. D. L. LYCETT.

County Hall,  
Trowbridge.



## *Committees*

The Committees of the County Council mainly concerned with public health during this year were:—

*Health Committee*, the Sub-Committees of which are as follows:—

Staff and General Purposes Sub-Committee,  
Maternity and Child Welfare Sub-Committee,  
Mental Health Sub-Committee,  
Ambulance Service and Health Centres Sub-Committee.

*Water Supplies and Sewerage Schemes Committee.*

*Education Committee* (school health service and hygiene in schools).

Close liaison is also maintained with other Committees, such as the Welfare Committee and the Children's Committee, and the County Medical Officer acts as adviser on health matters to all Committees of the Council.

Under Section 46 of the Local Government Act, 1958, functions in respect of the following services are delegated to the Swindon Borough Council:—

Health Centres  
Care of Mothers and Young Children  
Midwifery  
Health Visiting  
Home Nursing  
Vaccination and Immunisation  
Domestic Help  
Prevention of Illness, Care and After-Care

## Staff

County Medical Officer of Health and Principal School Medical Officer:—

C. D. L. Lycett, M.D., B.S., D.P.H.

Deputy County Medical Officer of Health and Deputy Principal School Medical Officer:—

J. H. Whittles, *T.D.*, M.D., B.S., B.Sc., D.P.H.

Senior Medical Officers:—

E. Hazel Williams, M.B., B.S., D.P.H., D.C.H.

S. W. W. Terry, M.B., B.S., D.P.H., D.T.M. and H.

Medical Officer of Health and Principal Borough School Medical Officer, Swindon:—

J. Urquhart, M.B., Ch.B., D.P.H.

Assistant County Medical Officers (also School Medical Officers):—

K. J. Adams, M.R.C.S., L.R.C.P., D.P.H. (also Medical Officer of Health, Devizes Borough and Devizes Rural District).

C. L. Broomhead, *T.D.*, M.D., B.Ch., B.A.O., D.P.H. (also Medical Officer of Health, Calne Borough, Chippenham Borough, Malmesbury Borough, Calne and Chippenham Rural District, and Malmesbury Rural District).

J. L. Davies, M.B., B.S., D.P.H. (also Medical Officer of Health, Trowbridge Urban District and Bradford-on-Avon Urban District).

F. J. G. Lishman, M.D., B.S., D.P.H., D.L.O., L.M.C. (Canada), (also Medical Officer of Health Wilton Borough, Salisbury and Wilton Rural District, and Mere and Tisbury Rural District).

H. I. Lockett, M.B., B.S., D.Obst., R.C.O.G., D.P.H. (also Medical Officer of Health, Marlborough Borough, Amesbury Rural District, Marlborough and Ramsbury Rural District and Pewsey Rural District).

Olga E. Nietupska, Med. Dipl. (Warsaw), D.P.H. (also Medical Officer of Health, Cricklade and Wootton Bassett Rural District). (Resigned 30.9.63.)

J. Reynolds, *M.C.*, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H. (also Medical Officer of Health, Warminster Urban District, Westbury Urban District, and Warminster and Westbury Rural District).

P. J. Speller, M.B., Ch.B., D.P.H. (also Medical Officer of Health, Melksham Urban District and Bradford and Melksham Rural District).

J. A. Theobald, M.B., B.S., D.P.H. (also Medical Officer of Health, Highworth Rural District).

E. M. Wright, *T.D.*, M.A., B.M., B.Ch., D.P.H. (also Medical Officer of Health, Salisbury City),

D. M. Blomfield, M.B., B.S., D.P.H.

H. Margaret Hammond, M.B., Ch.B.

Elizabeth Heathcote, M.B., Ch.B.

Blaguigna Popham, M.R.C.S., L.R.C.P., D.P.H.

Ethel M. Voigt, M.B., B.Ch., B.A.O.

Psychiatrists (part-time):—

K. C. P. Smith, M.R.C.S., L.R.C.P., D.P.M.

T. A. A. Hunter, B.A., M.B., B.Ch., M.R.C.P.

Chest Physician:—

J. S. Harper, M.B., Ch.B., M.R.C.P., D.P.H. (by arrangement with Regional Hospital Boards).

## Assistant Chest Physicians:—

A. C. Molden, M.B., Ch.B. (by arrangement with Regional Hospital Boards).

Ellen O'Donovan, M.B., B.Ch., B.A.O., L.M. (by arrangement with Regional Hospital Boards).

## Chief Dental Officer and Principal School Dental Officer:—

D. Middleton, L.D.S.

## Assistant Dental Officers and School Dental Officers:—

P. M. H. Balfe, L.D.S.

A. T. Craig, L.D.S. (Retired 14.3.63.)

F. H. R. Davey, *O.B.E.*, L.D.S. (Retired 12.8.63.)

B. R. Huddart, L.D.S. (Resigned 31.3.63.)

E. C. Humphreys, L.D.S.

F. Lake, L.D.S.

R. S. McMinn, L.D.S.

C. D. Parkinson, L.D.S.

E. H. Randerson, L.D.S.

E. G. H. Lightfoot, L.D.S. (Commenced 6.8.63.)

Joan C. Ellwood, L.D.S. (Commenced 24.6.63.)

## Dental Auxiliaries:—

Heather Hill. (Commenced 16.9.63.)

Helen Rumford. (Commenced 14.1.63.)

## Psychologist:—

C. S. Rushton, B.A.

## Chief Administrative Assistant:—

W. R. Brockway

## Superintendent Nursing Officer:—

Eleanor W. Redwood, S.R.N., S.C.M., H.V. Cert.

## Superintendent Health Visitor:—

Eileen Search, S.R.N., S.R.F.N., S.C.M., H.V. Cert.

## County Public Health Inspector and Water Supplies Officer:—

T. R. Cox, M.R.S.H., M.A.P.H.I.

## Mental Health Supervising Officer:—

K. W. Gibbs

## County Ambulance Officer:—

M. F. Smith (Resigned 30.4.63.)

N. F. Russell. (Commenced 8.7.63.)

## Chiropodists:—

Marion J. Read, M.Ch.S.

E. W. Beattie, M.Ch.S.

G. H. Gander, M.Ch.S.

J. D. Pullen, M.Ch.S. (Commenced 2.12.63.)

## Hearing Therapist:—

D. W. Brown, B.A.



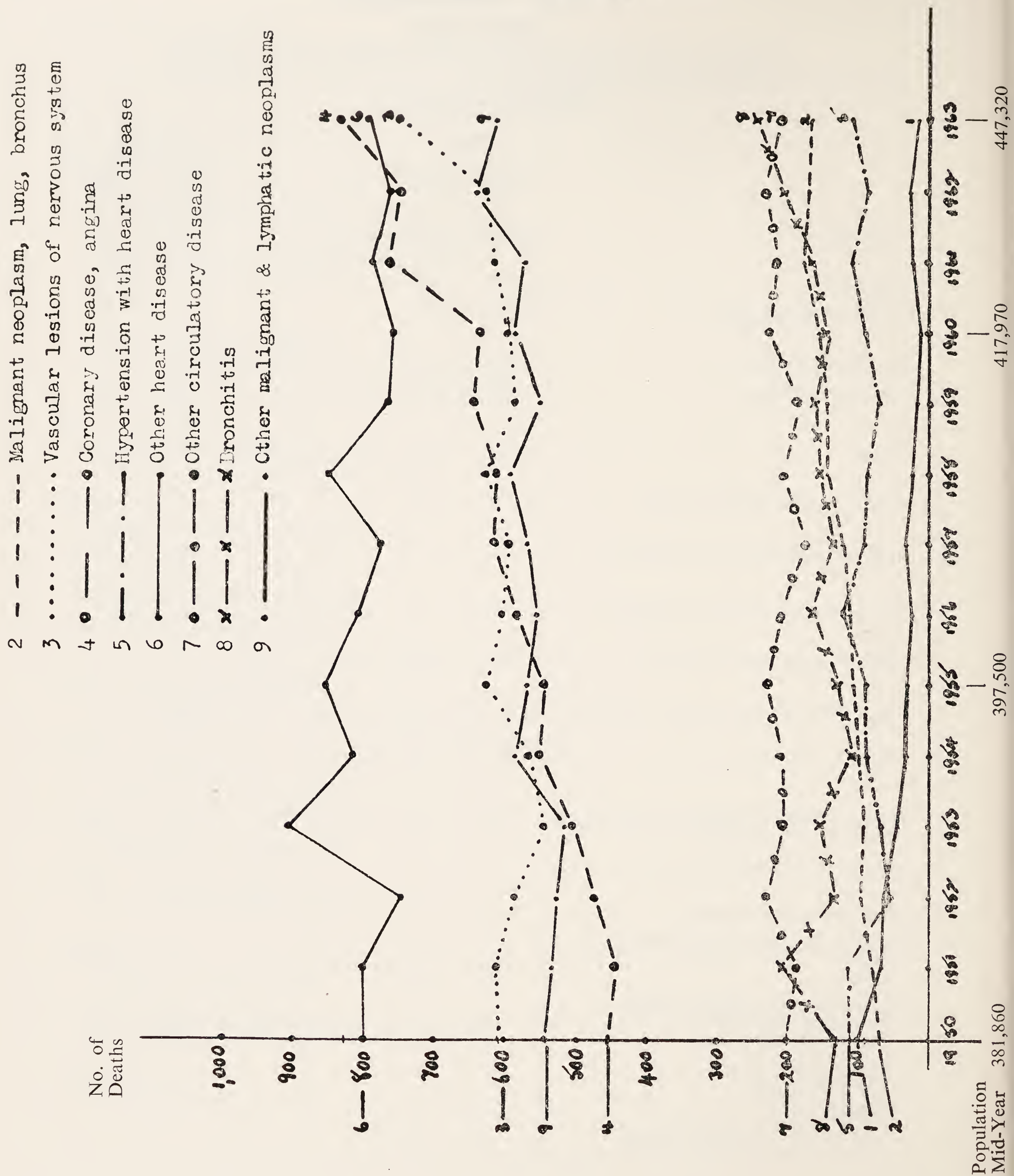
# Vital Statistics

## POPULATION

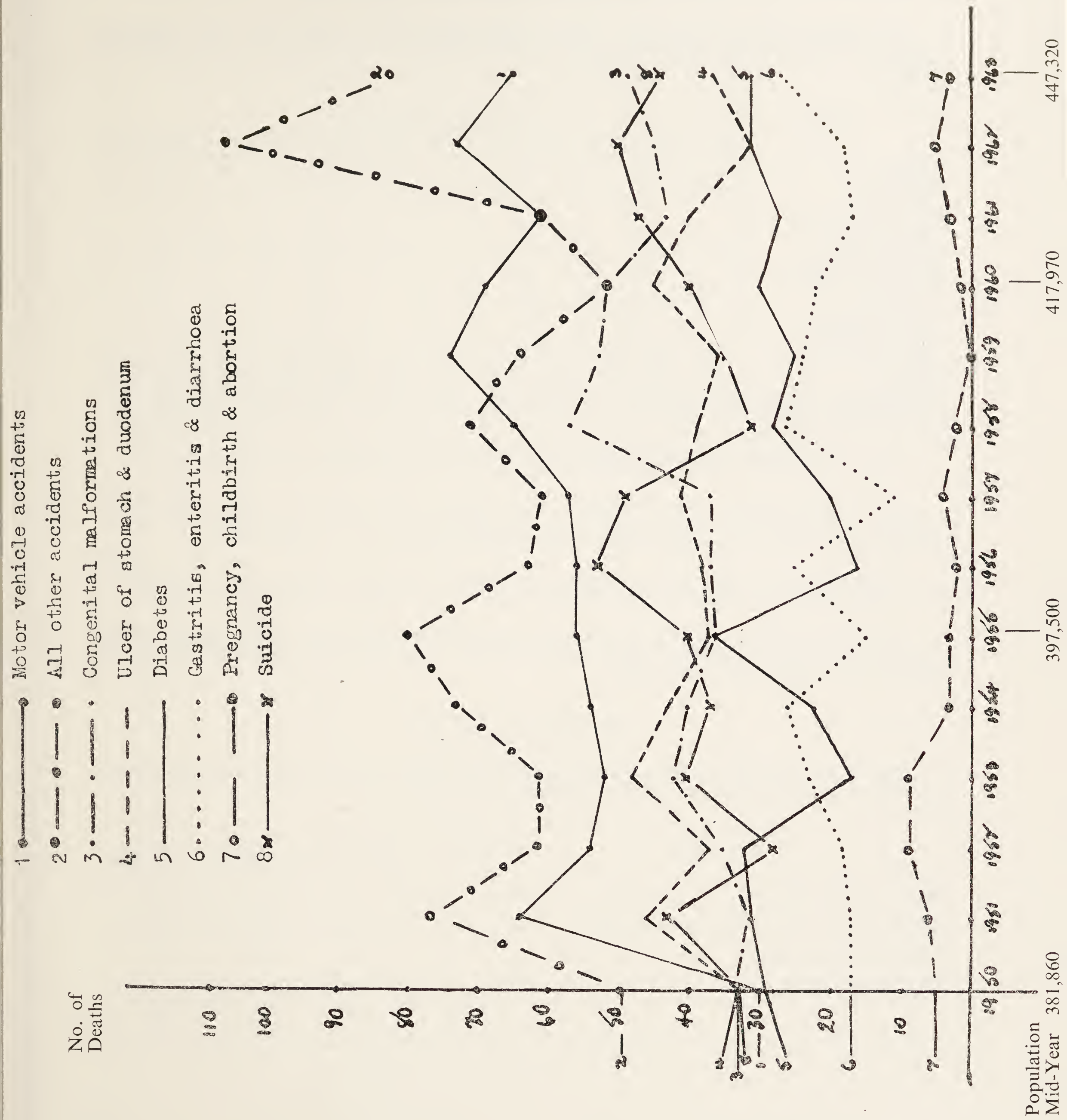
The Registrar General's estimate for 1963 (including Services) 447,320  
The figure for the previous year was 439,260

## BIRTHS AND DEATHS

	NUMBER		RATE FOR COUNTY		RATE FOR ENGLAND AND WALES	
	1963	1962	1963	1962	1963	1962
Live Births ... ..	8,867	8,513	20.21	19.57	18.2	18.0
			(Per 1,000 Population)			
Still Births ... ..	157	154	17.73	17.95	17.3	18.1
			(Per 1,000 Live and Still Births)			
Total Live and Still Births ... ..	9,024	8,667	—	—	—	—
			(Per cent of Total Live Births)			
Illegitimate Live Births ... ..	489	407	5.5	4.78	6.9	6.6
			(Per 1,000 Live Births)			
Premature Live Births ... ..	540	505	60.9	59.32	Not available	66.8
			(Per 1,000 Population)			
Deaths ... ..	5,014	4,754	11.5	10.82	12.2	11.9
			(Per 1,000 Live Births)			
Deaths of Infants under one (Total) ... ..	184	176	20.75	20.67	20.9	20.7
			(Per 1,000 Legitimate Live Births)			
Deaths of Infants under one (Legitimate)... ..	172	171	20.53	21.09	Not available	21.3
			(Per 1,000 Illegitimate Live Births)			
Deaths of Infants under one (Illegitimate) ... ..	12	5	24.5	12.28	Not available	
			(Per 1,000 Live Births)			
Deaths of Infants under four weeks ... ..	132	120	14.9	14.09	14.2	15.1
			(Per 1,000 Live Births)			
Deaths of Premature Infants under four weeks ... ..	73	52	8.23	6.12	Not available	2.3
			(Per 1,000 Live Births)			
Deaths of Infants under one week ... ..	106	98	11.9	11.51	Not Available	12.9
			(Per 1,000 Live and Still Births)			
Perinatal Mortality Rate (Still Births and Deaths under one week combined)	263	252	29.14	29.07	29.3	30.8
			(Per 1,000 Live and Still Births)			
Maternal Deaths (including abortions) ... ..	3	5	0.33	0.58	0.28	0.35
			(Per 1,000 Population)			
Deaths from Cancer (all forms) ... ..	778	833	1.73	1.89	2.17	2.17
Deaths from Cancer of Lung and Bronchus—						
Male ... ..	141	154	} 0.37 }	0.39	0.52	0.51
Female ... ..	26	16				
Deaths from certain Infectious Diseases—						
Tuberculosis, Respiratory ... ..	16	23	} 0.045 }	0.061	0.063	0.066
Tuberculosis, Other ... ..	4	4				
Diphtheria ... ..	—	—				
Meningococcal Infections ... ..	—	2				
Acute Poliomyelitis ... ..	—	—				
Measles ... ..	4	—				
Whooping Cough ... ..	—	—				
Other Infective and Parasitic Diseases ... ..	6	9				







## INFECTIOUS DISEASES

The following are the aggregate totals of notifications during 1963 of the more important infectious diseases, with comparative figures for the preceding ten years. The figures include non-civilians.

Disease	Total Notifications during											
	1952	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963
Smallpox ... ..	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever ... ..	407	282	208	198	221	154	539	426	276	151	163	132
Diphtheria ... ..	1	1	3	1	—	—	—	—	—	—	—	—
Enteric Fever (including Paratyphoid) ... ..	1	—	5	3	1	2	10	1	1	4	—	—
Puerperal Pyrexia ... ..	113	142	93	124	151	191	174	162	88	103	97	73
Meningococcal Infection ... ..	11	8	1	9	12	5	5	6	4	7	8	9
Acute Poliomyelitis—												
Paralytic ... ..	28	57	20	21	10	16	9	11	4	3	2	1
Non-Paralytic ... ..	18	45	3	17	9	7	1	4	—	2	—	—
Acute Encephalitis ... ..	—	2	1	—	—	—	1	—	5	4	—	—
Ophthalmia Neonatorum ... ..	5	6	3	2	2	2	1	3	—	7	—	5
Whooping Cough ... ..	1129	1012	1208	987	445	1160	318	274	353	203	40	263
Measles ... ..	1541	7225	334	6227	348	7177	5046	4697	332	9750	427	6192
Dysentery ... ..	} Figures for these years are not available		77	58	618	181	261	267	882	132	186	379
Food Poisoning ... ..			71	141	146	111	62	62	39	29	38	110

In the notified case of poliomyelitis the diagnosis was not confirmed.

Although whooping cough notifications were higher in 1963 than the very low figure of 40 reached in 1962, over the years the incidence of the disease has declined. In England and Wales, notifications in 1962 were approximately 8,000 compared with about 115,000 in 1952.

Deaths from whooping cough in England and Wales during 1962 numbered 24 compared with 181 in 1952. Deaths in Wiltshire since 1952 have totalled 3, 1 in 1955, 1 in 1958 and 1 in 1961.

Immunisation against whooping cough was first introduced into the County scheme in 1956 although many general practitioners had, before this date, used combined antigens which included immunisation against whooping cough.

## VENEREAL DISEASE

During the year, 608 Wiltshire patients attended treatment centres at Salisbury, Swindon, Bath and Bristol for the first time. The following table shows details:—

Treatment Centre	Syphilis	Gonorrhoea	Other Conditions	Total new cases
Salisbury General Infirmary ... ..	3	19	88	110
Royal United and St. Martin's Hospitals, Bath ... ..	10	11	207	228
Isolation Hospital, Swindon ... ..	5	83	168	256
Maudlin Street Clinic, Bristol ... ..	1	1	12	14
	19	114	475	608



The totals of the cases included in the foregoing table for previous years are shown below:—

Year	Syphilis	Gonorrhoea	Other Conditions	Total new cases
1955	30	41	388	459
1956	22	37	272	331
1957	18	71	266	355
1958	13	56	375	444
1959	10	71	206	287
1960	15	46	220	281
1961	11	89	338	438
1962	12	123	382	517
1963	19	114	475	608

The rise in the incidence of new cases of gonorrhoea, which has been a feature in recent years, has not continued in 1963, although figures for syphilis and other conditions have increased.

From the evidence so far available, there would not appear to be the disproportionate increase in gonorrhea amongst adolescents which has been a feature of the national figures.

## \* *Care of Mothers and Young Children*

### RELAXATION AND MOTHERCRAFT CLASSES

These classes are now held at Corsham, Highworth, Marlborough, Purton, Redlynch, Salisbury, Sherston and Wootton Bassett for expectant mothers and further expansion of such classes is anticipated. The classes are run by the local midwifery and health visiting staff and are usually held weekly. Basic equipment is provided and opportunity is taken to use visual aids on subjects particularly applicable to expectant mothers.

### MATERNAL MORALITY

The following table gives the number of deaths attributable to pregnancy, childbirth or abortion in the past ten years:—

Year	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963
County, excluding Swindon ...	2	1	2	2	2	Nil	1	3	4	3
Swindon ... ..	1	2	Nil	2	Nil	Nil	Nil	Nil	1	Nil
TOTAL ...	3	3	2	4	2	Nil	1	3	5	3
Rate per 1,000 live and stillbirths	0.47	0.47	0.30	0.57	0.28	Nil	0.13	0.37	0.58	0.33

The three deaths during 1963 occurred in hospital. The rates quoted in this table are based on such small numbers that variations in them should be treated with reserve.

### CLINICS AND CENTRES

The new Central Health Clinic at Salisbury, brought into use in October of the previous year, was officially opened by the Chairman of the County Health Committee, Alderman Mrs. C. R. Y. King, on the 17th May, 1963. The first full year of use has demonstrated how services can develop when housed in adequate premises. During the year attendances at the Child Welfare Centre have increased considerably; the attendances of children numbered 7,429 as against 5,231 for 1962. A weekly mothers' club is also held which has led to a planned health education programme of films, filmstrips and talks by the health visitors, and this attracts increasing attendances. Extra use of the new clinic has been made by the medical loan depot, enuresis clinic, classes for partially hearing children, the Family Planning Association and a midwives' booking clinic combined with mothercraft and relaxation classes.

The new clinic at Devizes came into use on the 2nd September, 1963; increased services are developing here also.

At the end of the year there were 137 child welfare centres, 63 with a doctor attending and 74 attended by health visitors only. Additional centres were opened at Wroughton R.A.F. Camp, Ashton Keynes, Compton Bassett and Worton.

A health visitor's centre has replaced the doctor's centre at Yatesbury R.A.F. Camp and three centres attended by health visitors were discontinued.

\*The statistics under this section exclude the Borough of Swindon (unless specifically stated).



The following table gives aggregate figures, with the previous year's figures in brackets, of attendances at the centres:—

	Doctors' Centres	Health Visitors' Centres	Totals
Total attendances during the year ... ..	58,889 (53,302)	12,949 (12,953)	71,838 (66,255)
Number of children who attended during the year ...	11,273 (11,010)	2,872 (2,594)	14,145 (13,604)
Number of new attenders (under one year and included above) ... ..	4,164 (3,834)	1,022 (947)	5,186 (4,781)
Atenders under one per 1,000 notified live births ...	610 (600)	150 (148)	760 (748)

The use of the mobile child welfare centre has continued and it now serves 13 villages.

A considerable amount of voluntary work continues in many centres and this relieves the health visitors for their essential personal contact with the mothers and children.

The volume of proprietary articles sold (or issued free where justified by financial circumstances) through child welfare centres continues to increase, and in the financial year 1963/64 reached a turnover of £17,316. A small handling charge is added to the cost price. The following table shows the increase in the scheme:—

Article	Basic unit of quality	Supplied to Centres for issue			
		1960	1961	1962	1963
Infant Milk Foods ... ..	lb.	29,322	35,724	50,448	60,402
Baby Cereal... ..	packets	6,510	8,142	9,174	12,600
Weaning Foods (Meat Fruit, Vegetables, etc.) ...	tins	2,952	3,420	3,576	4,356
Nutrients (chiefly Marmite and Vitamin C Syrup or Juice) ...	Containers	22,572	24,684	29,088	36,696
Baby Rusks ... ..	packets	3,564	4,014	6,444	10,872
Glucose ... ..	containers	1,788	1,068	828	1,164
Malted Milk ... ..	tins	3,564	3,492	3,384	5,244
Teats and Accessories ... ..		1,326	1,776	2,148	3,072
Medicaments ... ..		(Not available)			2,772

#### PREVENTIVE MENTAL HEALTH

Particulars of the work of the combined child guidance service for pre-school and school children appear in my annual report as Principal School Medical Officer.

#### DISTRIBUTION OF WELFARE FOODS

At the end of the year there were, excluding Swindon, 18 main centres open in the towns and 191 smaller centres.

The following amounts of food were issued in 1963 (figures for the previous five years have also been shown):—

	1958	1959	1960	1961	1962	1963
National dried milk (full cream and half cream) ... ..	83,431	71,479	63,683	52,790	50,702	42,026
Cod liver oil ... ..	18,547	17,413	16,899	12,080	8,683	5,143
Vitamins A and D tablets ... ..	13,199	13,427	14,526	11,022	6,836	5,217
Orange Juice ... ..	153,857	149,987	145,071	91,563	53,937	53,158

(These amounts do not include issues made in Swindon, although these were accounted for centrally in the County Health Department).

Emergency needs continue to be met by transfers arranged within the County from headquarters.

There has been a continued reduction in issues of welfare foods dating from the time of introduction of a charge for cod liver oil and vitamin A and D tablets and the increase in the price of orange juice.

The distribution of welfare foods continues to be carried out mainly by voluntary helpers, whom I should like to thank for their valuable assistance. The total value of the money collected for foods issued during the year was £9,062 5s. 1d. Sums totalling only £53 15s. 5d. had to be written off, due mainly to insufficiently stamped coupons and to national dried milk going out-of-date at centres; these losses represented 0.41 % of the annual turnover.

#### INVESTIGATION OF HOME CIRCUMSTANCES OF PATIENTS APPLYING FOR MATERNITY BEDS TO DETERMINE NEED FOR PRIORITY OF ADMISSION

The following table summarises the results of the investigations made at the request of the hospitals concerned during 1963:—

Maternity Hospital	No. of patients whose social conditions were investigated by County Council	No. recommended for priority of admission	No. not so recommended	Total No. of deliveries in Hospital (where known)
Bradford on Avon Maternity Hospital	2	2	—	719
Andover ... ..	8	4	4	—
Devizes Maternity Hospital ... ..	78	58	20	352
Greenways Maternity Hospital ... ..	58	44	14	556
Kingshill Maternity Hospital ... ..	116	73	43	406 (Excluding births attributable to Swindon Borough)
South Mead Hospital ... ..	1	1	—	—
Malmesbury Hospital ... ..	15	12	3	192
Odstock Hospital ... ..	11	6	5	1,158 (From Wiltshire)
Savernake Hospital ... ..	4	2	2	271
Frome Hospital ... ..	7	6	1	—
	300	208	92	



These figures show that 30.6 per cent of patients whose social circumstances were investigated were not recommended for priority of admission; this figure compares with 33.4 per cent in the previous year. In the case of patients whose admission to hospital was not recommended, every assistance in making suitable arrangements for confinement at home was given by the domiciliary midwifery and home help services.

#### PERINATAL MORTALITY AND CARE OF PREMATURE BABIES

The perinatal mortality rate (based on stillbirths and deaths of infants under one week) is probably beginning to replace the maternal mortality rate as an indicator of the effectiveness of ante-natal care and obstetrics, and the following table shows the situation in this County since 1959:

Year		Total Births	No. of stillbirths	No. of Deaths of infants under 1 week	Total Deaths of Infants under 1 week and stillbirths combined	Peri-natal Mortality Rate per 1,000 total births
1959	County ... ..	7,427	130	84	214	28.8
	County, excl. Swindon ...	5,637	100	57	157	29.6
	Swindon ... ..	1,790	30	27	57	31.8
	England and Wales ...	766,459	16,076	10,169	26,245	34.1
1960	County ... ..	7,982	150	106	256	32.07
	County, excl. Swindon	6,053	122	86	208	34.3
	Swindon ... ..	1,929	28	20	48	24.8
	England and Wales ...	798,407	15,734	10,475	26,209	32.8
1961	County ... ..	8,214	160	100	260	31.65
	County, excl. Swindon ...	6,173	113	74	187	30.2
	Swindon ... ..	2,041	47	26	73	35.7
	England and Wales ...	819,474	15,631	10,768	26,399	32.0
1962	County ... ..	8,667	154	98	252	29.07
	County, excl. Swindon	6,511	119	77	196	30.1
	Swindon ... ..	2,156	35	21	56	25.9
	England and Wales ...	856,070	15,487	10,888	26,375	30.8
1963	County ... ..	9,024	157	106	263	29.14
	County excl. Swindon	6,934	113	79	192	27.6
	Swindon ... ..	2,090	44	27	71	33.9
	England and Wales ...	856,368	15,074	N/A	N/A	N/A

The following tables give information about premature births and the mortality rate up to 28 days.

Year	Premature live births				Deaths of premature babies within 28 days, of whom the number shown in italics died within 24 hrs.			
	Swindon	Rate per 1,000 live births	Remainder of County	Rate per 1,000 live births	Swindon		Remainder of County	
1955	91	79.1	304	59.6	11	8	35	23
1956	105	77.5	293	57.7	7	<i>1</i>	42	23
1957	124	79.8	355	66.9	22	<i>11</i>	68	40
1958	135	84.3	295	53.8	30	<i>15</i>	45	27
1959	111	63.4	343	61.8	17	9	45	25
1960	139	73.1	385	64.9	12	6	69	42
1961	139	69.7	355	58.6	15	<i>10</i>	44	30
1962	132	62.2	373	58.3	13	7	39	30
1963	134	65.5	406	59.5	18	8	55	19

The following analysis refers to babies in the whole County who were prematurely born at home or in hospital:—

Year	Born at home or in a nursing home				Born in hospital	
	Total	Transferred to hospital	Died in hospital within 28 days	Died at home within 28 days	Total	Died within 28 days
1955	97	15	1 <i>1</i>	4 3	298	41 27
1956	92	20	6 <i>1</i>	1 <i>1</i>	306	42 22
1957	118	37	13 6	5 4	361	72 41
1958	100	31	8 2	3 3	330	64 37
1959	77	19	1 <i>1</i>	1 <i>1</i>	377	61 32
1960	87	23	3 <i>1</i>	7 <i>1</i>	437	71 46
1961	72	21	4 3	6 6	422	49 31
1962	75	19	2 <i>1</i>	2 2	430	48 34
1963	110	24	8 3	3 <i>1</i>	430	62 23

The figures in italic show the deaths of premature babies within 24 hours which are included.

Oxygen cots for conveyance of premature or other babies to hospital are kept at the Trowbridge Chippenham, Salisbury and Swindon ambulance stations and were used on 13 occasions during 1963.

The following tables give the stated causes (as far as this information is available) of stillbirths, deaths of premature babies within twenty-eight days and deaths of infants under one week. With the exception of two, all the premature babies in fact died within seven days, and are, therefore, included in the perinatal mortality figures.

<i>Stillbirths</i>									
<i>Stated Causes</i>							<i>County</i>	<i>County excl. Swindon</i>	<i>Swindon*</i>
Placental infarction and Toxaemia of Pregnancy	...	...	...	...	...	...	26	24	2
Atelectasis and Asphyxia	...	...	...	...	...	...	20	19	1
Anencephaly	...	...	...	...	...	...	14	14	—
Cord round neck	...	...	...	...	...	...	13	7	6
Antepartum haemorrhage	...	...	...	...	...	...	11	6	5
Cerebral haemorrhage	...	...	...	...	...	...	9	9	—
Multiple Congenital Abnormalities	...	...	...	...	...	...	7	6	1
Rhesus Incompatibility	...	...	...	...	...	...	3	3	—
Prematurity	...	...	...	...	...	...	3	3	—
Other malformation of C.N.S.	...	...	...	...	...	...	3	1	2
Post Maturity	...	...	...	...	...	...	2	1	1
Congenital Heart Disease	...	...	...	...	...	...	2	2	—
Hydramnios	...	...	...	...	...	...	2	2	—
Malpresentation	...	...	...	...	...	...	1	1	—
Lack of attention	...	...	...	...	...	...	1	1	—
Undetermined	...	...	...	...	...	...	16	13	3
Totals							133	112	21

\*Six months only.

The following table gives information obtained on the causes of the 73 deaths of premature babies occurring within 28 days.

<i>Deaths of Premature Babies within 28 days</i>									
<i>Stated Causes of death</i>							<i>County</i>	<i>County excl. Swindon</i>	<i>Swindon</i>
Prematurity	...	...	...	...	...	...	27	19	8
Atelectasis	...	...	...	...	...	...	16	13	3
Broncho-pneumonia	...	...	...	...	...	...	7	4	3
Cerebral haemorrhage	...	...	...	...	...	...	6	6	—
Congenital Heart Disease	...	...	...	...	...	...	5	4	1
Congenital Abnormalities...	...	...	...	...	...	...	4	4	—
Haemolytic Disease	...	...	...	...	...	...	2	1	1
Congenital Defects, Kidneys	...	...	...	...	...	...	2	1	1
Hyaline Membrane	...	...	...	...	...	...	2	2	—
Anencephalic	...	...	...	...	...	...	1	—	1
Microcephaly	...	...	...	...	...	...	1	1	—
Totals							73	55	18



*Deaths of babies within one week, excluding premature babies*

<i>Stated Causes of death</i>						<i>County</i>	<i>County excl. Swindon</i>	<i>Swindon</i>
Cerebral haemorrhage	...	...	...	...	...	13	11	2
Atelectasis	...	...	...	...	...	12	8	4
Congenital Heart Disease	...	...	...	...	...	3	2	1
Atelectasis: Tentorial Tear	...	...	...	...	...	2	1	1
Broncho-pneumonia	...	...	...	...	...	2	1	1
Malformation of Central Nervous System	...	...	...	...	...	1	—	1
Rhesus Incompatibility	...	...	...	...	...	1	1	—
Rupture of Liver	...	...	...	...	...	1	—	1
Peritonitis, perforation of ileum, volvulus	...	...	...	...	...	1	—	1
Multiple Congenital abnormalities	...	...	...	...	...	1	—	1
Totals						37	24	13

## CARE OF UNMARRIED MOTHERS AND THEIR CHILDREN

The following figures show the number of births out of wedlock in the County, the number of women assisted by the Diocesan moral welfare workers under the arrangements for the care of unmarried mothers and their infants and the number admitted to mother and baby homes since 1949.

<i>Illegitimate Live Births</i>					
<i>Year</i>		<i>No.</i>	<i>Percentage of</i> <i>Live Births</i>	<i>No. Assisted</i>	<i>Admitted to Mother</i> <i>and Baby Homes</i>
1949	...	309	5.06	223	97
1950	...	293	4.88	211	94
1951	...	309	5.13	225	88
1952	...	310	5.24	239	70
1953	...	300	4.67	247	78
1954	...	271	4.33	227	72
1955	...	274	4.39	235	68
1956	...	238	3.70	211	76
1957	...	306	4.23	247	71
1958	...	295	4.16	278	63
1959	...	277	3.80	252	72
1960	...	295	3.77	297	74
1961	...	292	3.63	305	67
1962	...	407	4.78	279	73
1963	...	489	5.5	287	80

The County Council has continued to subsidise the Salisbury and Bristol Diocesan Associations for Moral Welfare, whose field workers provide the help for unmarried mothers and their children, the Superintendent Health Visitor acting as liaison officer with the Associations.

Despite staffing difficulties, particularly in some areas, the numbers helped have been maintained at about the same level. There has, however, been a further increase in the number of births out of wedlock and it is likely that there are increasing numbers who do not seek help from the moral welfare workers. While no appeal for help would be refused, there must be a limiting factor on the work which can be undertaken by the staff available. The staff has been increased during the year in the Salisbury Diocesan area of the County and the Bristol Diocesan Association who cover the work in the remainder of the County are known to be considering increases in staff. The County Council have usually considered sympathetically applications from the Diocesan Associations for increased grants towards the cost of additional staff when the need has been demonstrated.



The Salisbury Diocesan Association continues to run two mother and baby homes in the County, one at Devizes and one at Beckingsale House, Salisbury. The former is in premises provided by the County Council but staffed by the Association.

The following table shows the continued increase in the number of births out of wedlock to women under 21 years of age assisted by moral welfare workers.

	1951	1956	1961	1962*	1963
Under 16 years of age ...	4	6	10	21	22
16 to 18 years of age ...	18	26	43	64	75
18 to 21 years of age ...	40	60	94	90	93

\*These figures are a slight underestimate as the particulars were not available in respect of one part of the County.

During the year 78 admissions were made to the Devizes Hostel, for 50 of which the Health Committee was financially responsible, and there were 30 admissions to other homes at the Council's expense, including 6 to Beckingsale House, Salisbury.

#### **REPORT OF THE CHIEF DENTAL OFFICER, MR. D. MIDDLETON, L.D.S.**

Apart from treatment, much of the dental officers' time is spent in advising mothers on the best methods of maintaining a good standard of dental health for themselves and their family. This adds impetus to the advice which has already been given by the health visitors. In spite of all this there are still too many children appearing at their first school dental examinations showing little or no sign of regular examinations or treatment. Much of this stems, I fear, from the misconception that deciduous or milk teeth are temporary and, therefore, do not matter; but they do matter, and it cannot be emphasized enough that they play a most important part in the development of the child and should be well cared for.

Two dental auxiliaries joined the staff during the year. I hope with this new type of dental help that it will be possible to devise means of reaching the non-regular clinic attender with dental health education. Up till now, with the perennial problem of staff shortage, it has not been possible to reach these children, and the first school examinations show that very few of them seek the help of the general dental service. One method which has been suggested is for the dental auxiliary to attend immunisation clinics and to advise mothers on dental health matters, these clinics being chosen as they attract many mothers who are not regular clinic attenders.

The high proportion of extractions to fillings with the expectant and nursing mothers is explained by the fact that the mothers attending are in general those who have no regular family dentist, and, therefore, tend to have the uncared for mouth.

I regret that it is not possible to report any progress with a County policy for the fluoridation of the public water supplies.

Once again, I should like to conclude by thanking the health visitors for all their help with dental health education. Health education is a slow undramatic process and shows no obvious immediate return.

RECORD OF DENTAL WORK UNDER SECTION 22, NATIONAL HEALTH SERVICE ACT, 1946 (INCLUDING SWINDON)

(Figures for the previous year are shown in brackets.)

(a) Numbers provided with dental care

	Examined	Commenced Treatment	Completed Treatment	Made Dentally Fit
(1)	(2)	(3)	(4)	(5)
Expectant and Nursing Mothers ...	241 (233)	164 (209)	90 (146)	90 (90)
Children under Five ...	759 (581)	334 (353)	246 (277)	246 (228)

(b) Forms of dental treatment provided.

	Scalings and Gum Treatment	Fillings	Silver Nitrate Treat- ment	Crowns or Inlays	Extrac- tions	General Anaes- thetics	Dentures Provided		Radio- graphs
							Full Upper or Lower	Partial Upper or Lower	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
Expectant and Nursing Mothers	115 (88)	263 (185)	4 (1)	1 (—)	193 (284)	25 (24)	24 (29)	24 (28)	15 (9)
Children under Five ...	26 (4)	342 (227)	458 (216)	— (—)	388 (347)	121 (106)	Nil (—)	Nil (—)	Nil (—)



## \* *Midwifery*

### STAFF

The number of practising midwives in the area at the end of the year was as follows:—

Domiciliary midwives (a) employed by County Council	...	...	78	(78)
(b) Hospital Management Committee	...	...	2	(2)
Hospital Midwives	...	...	74	(80)
Midwives in private practice (including those in nursing homes)	...	...	5	(5)
			159	(165)

(The figures in brackets are for those for 1962)

### WORK UNDERTAKEN

The following table gives a summary of the work done during the year by all midwives in the County, excluding Swindon:—

Category	Domiciliary Cases				Totals	Cases in Hospitals and Nursing Homes
	Doctor not booked		Doctor booked			
	Doctor present at delivery	Doctor not present	Doctor present at delivery	Doctor not present		
County Council Midwives ...	2 (3)	5 (13)	272 (197)	1,353 (1,272)	1,632 (1,485)	— (—)
Midwives employed by Hospitals Management Committee ...	— (—)	— (—)	28 (27)	145 (157)	173 (184)	3,617 (3,466)
Private Midwives ...	— (—)	— (—)	2 (1)	1 (2)	3 (3)	24 (16)
TOTALS ...	2 (3)	5 (13)	302 (225)	1,499 (1,431)	1,808 (1,672)	3,641 (3,482)
	GRAND TOTALS ...					5,449 (5,154)

(The figures in brackets are those for 1962)

In addition to the figures given in the above table, County midwives were asked to attend 913 women discharged from maternity hospitals before the tenth day, compared with 922 in the previous year.

Consideration is being given to increasing the time available for midwifery supervision in Swindon. At present the County is covered by two officers, one of whom attends in the Borough of Swindon regularly on three half-days a week and is available at other times, being centred on an office at the Clinic at Marlborough.

### MIDWIVES ACT, 1918

Medical aid was summoned by midwives in 178 domiciliary cases attended by them during 1963, compared with 204 in 1962.

## \* *Health Visiting*

### STAFF

The following table shows the development of the service since 1948 and at the end of the year there were no vacancies.

Year	Establishment of qualified full-time staff at end of year (County area, excluding Swindon)	Number of dispensations held at end of year in respect of unqualified staff employed partly on infant visiting duties
1948	20	76
1953	24	31
1958	37	3
1963	63	1

Three assistants to health visitors commenced duty early in the year and have since been employed in the Salisbury, Trowbridge and Corsham/Melksham areas. The intention is to establish in-service trained assistants analogous to the welfare assistants recommended in the Younghusband report and the three assistants have received training during the year.

These assistants have proved valuable in carrying out duties not requiring the skill and training of a health visitor. During the year they undertook over 5,000 routine domiciliary visits and attended some 270 clinic sessions.

More appointments of this nature are planned.

### WORK UNDERTAKEN

The following table gives a summary of the visits undertaken by the health visitors during 1963 with figures for 1962 in brackets.

Number of Children under 5 years of age visited during year	Expectant Mothers		Children under 1 year of age		Children age 1 but under 2 years	Children age 2 but under 5 years	Tuber- culous house- holds	Other cases	Grand Total of Domiciliary Visits
	First visits	Total visits	First visits	Total visits	Total visits	Total visits	Total visits	Total visits	
21,022 (21,175)	1,340 (1,316)	1,683 (2,215)	6,205 (5,937)	38,285 (31,336)	16,171 (14,808)	26,056 (23,660)	1,547 (1,036)	34,734 (43,795)	118,476 (116,850)

The table excludes school nursing visits.

The number of live births (excluding Swindon) corrected according to domicile, was 6,821. The figure for 1962 was 6,392.

### GENERAL

There has been a small rise in the total number of visits paid by the health visitors who are, however, more and more becoming family health advisers so that the average time taken per visit increases. Motherhood at a much earlier age also means that the health visitors spend much time in helping quite young mothers to care for their babies. Routine screening tests and closer collaboration with general practitioners, hospitals, social workers and voluntary bodies also takes

\*The statistics under this section exclude the Borough of Swindon (unless specifically stated).



up much more of the health visitor's time. Relaxation and mothercraft classes and health education in schools and clinics are additional duties which reduce the amount of time available for home visiting.

The following table shows the average population per health visitor with figures for previous years:—

County (excluding Swindon)			
Year	Estimated Population, Mid Year	Establishment of Health Visitors	Average Population per Health Visitor
1956	328,760	29	11,336
1957	327,400	31	10,561
1958	326,040	37	8,811
1959	329,340	48	6,861
1960	333,100	56	5,948
1961	338,690	61	5,552
1962	344,700	61	5,650
1963	351,110	63	5,573

In 1956 the Working Party on Health Visitors recommended an average population of 4,300 per health visitor, and although this figure possibly represented an ideal it is clear that increases in health visitor establishments have not appreciably reduced the average population per health visitor since 1960.

Almost all school nursing duties are undertaken by qualified health visitors and the district nurses undertaking these duties now number three only.

At the end of the year four health visitors had been attached to the practices of general practitioners in Salisbury, Calne and the Chalke Valley area, and the almost twelve months' experience gained in this experiment has shown that liaison with general practitioners can, at least in certain cases, be usefully improved in this way. Other practitioners have expressed their interest in having health visitors attached and attachment will be gradually extended as opportunity permits.

Health visitors continue to devote a considerable amount of time to the home help service, and during the year paid 11,438 visits. This is a reduction on the previous year (15,010), largely due to the employment of the three assistants to health visitors for the more routine visiting for supervision of the home helps' work.

#### TRAINING SCHEME

Three students completed training and filled vacancies in the establishment in January.

Two students commenced training in the autumn and a further one was due to start in January, 1964.

#### "IN-SERVICE" TRAINING

The only course during the year was held at County Hall in November for the training of 35 health visitors who had not previously received instruction on the early detection of deafness. Thanks are due to Dr. L. Fisch of the Audiology Unit of the Royal National Throat and Ear Hospital, London, Mr. M. Reed, psychologist, and Miss W. Galbraith, hearing therapist, who conducted the course.

## SCREENING TESTS

(a) *for deafness*

Health visitors continue to undertake screening tests on babies at the age of three to four months, and when any hearing loss is suspected, further investigation is arranged. During the year 4,496 tests were made.

(b) *for phenylketonuria*

Routine tests are undertaken at four weeks for this rare condition, which leads to severe mental subnormality unless discovered and treated very early. 6,148 tests were made during the year and one positive was detected.

## “AT RISK” REGISTER

At the end of the year 607 children had been added to the register maintained of those babies born on or after the 1st January, 1962, who had been subjected to certain adverse influences in pre-natal or post-natal life, and particular attention is being paid to the follow-up of these children through the health visitors and child welfare centres with a view to the early detection of possible defects and referral for further investigation, particularly if there is any suggestion of loss of hearing.

## HEALTH EDUCATION

Health visitors hold a key position in health education work and the subject is dealt with separately in the following section.

## PROBLEM FAMILIES

The following table shows the volume of work undertaken during the year by the health visitors who continue to devote a considerable amount of time to helping families with seriously unsatisfactory home conditions. The figures in brackets are those for 1962:—

Number of families on list at end of year	...	136	(124)
Number added during year	... ..	27	(22)
Number removed during year	... ..	15	(17)
		9	(6) removed from County

One special home help only has been employed during the year, in the Trowbridge area. The special home help in Salisbury took up duties early in the year as an assistant to the health visitors and the post has not so far been filled. Ten families were assisted by the one whole-time special home help, and in addition specially selected part-time home helps assisted six problem families. Since the service started in 1955, 73 families have been helped with 106 periods of service.

When the Children and Young Persons Act, 1963, came into force, giving to the Children's Committee added powers to prevent children coming into care, a meeting of officers was held so that the new arrangements should be made as effective as possible without duplicating work already being done by the various departments concerned.



## *Health Education*

Health education has continued on the lines described in more detail in the report for last year.

In March, a one week course at Urchfont Manor College for Adult Education was arranged for medical officers; it was mainly devoted to teaching the techniques of speaking, and demonstrating health education material, to school children. Speakers for this part of the course, which included practical work at two local secondary modern schools, were from the University of Bristol Institute of Education. The remainder of the course was composed of lectures and discussions on paediatrics and other topics of interest to medical officers. As on all occasions when Urchfont Manor is used for training courses, its success was largely due to the excellent arrangements made by the Warden and his staff.

Consideration was given during the year to the need to re-open the question of health education in schools of a kind which, by promoting satisfactory inter-personal relationships and making available knowledge and advice on the problems of sexual behaviour, would be likely to help in the prevention of venereal disease and births out of wedlock.

The campaign against smoking has continued, and all secondary modern and grammar schools have now been provided with two film strips, one of which was developed from a flannelgraph devised by a member of the medical staff.

A Smokers' Health Clinic was opened at Melksham in January, 1963, and in the first year 38 patients made 79 attendances. Ten ceased smoking, and six reduced smoking substantially. Continuing attendance was being made by a further six, but sixteen failed to continue attendance. Removal to the new clinic being built at Melksham will be taken as a suitable opportunity to obtain some further publicity and increased attendances at this clinic.

Health visitors gave 940 talks during the year and 191 of these were in schools. The remainder were in clinics and to local organisations. There were also many talks given by medical, dental and other staff.

### *\* Home Nursing*

At the end of the year there were 90 home nurses, 12 being engaged whole-time on this service.

The following table shows the work done during 1963, with figures for 1962 in brackets.

	Medical	Surgical	Infectious Diseases	Tuberculosis	Maternal Complications	Others	Totals
Number of Cases Attended	4,751 (5,024)	1,681 (1,892)	72 (38)	37 (28)	124 (97)	750 (525)	7,415 (7,604)
Number of Visits Paid	78,205 (77,246)	23,756 (22,905)	255 (130)	1,189 (1,134)	829 (741)	5,713 (5,778)	109,947 (107,934)

One nurse was sent for district training under the City of Bristol scheme during the year.

\*Statistics in this section exclude the Borough of Swindon (unless specifically stated).

## \* *Immunisation*

There has been no change during the year in the procedures for immunisation against infectious diseases except the extensions to the scheme for immunisation against poliomyelitis referred to in the paragraph below.

Supplies of all antigens, other than smallpox lymph, are available from the Health Department to general practitioners upon request.

The comprehensive system of individual letters to parents to remind them of the need for immunisation procedures at particular times continues. To encourage the wider use of the personal immunisation record card, one of these (with a plastic container) is now sent to parents with the first letter about immunisation with a request that it should be presented for entries to be made on each occasion the child is immunised and kept readily available always in case information about tetanus immunisation is urgently required after an accident.

Following a pilot scheme, disposable syringes were introduced for all immunisation by County Council doctors and this has meant a considerable saving of time, particularly in school immunisation sessions in rural areas.

The following paragraphs give more detailed information about the immunisation undertaken against the various diseases.

### IMMUNISATION AGAINST SMALLPOX

The recommendation in 1962 that immunisation against smallpox should be given at 15-18 months of age instead of two months meant its virtual suspension for a period and this is reflected in the smaller numbers immunised in 1963, as compared with a normal year, 1961. The figures given for 1962 are, of course, exceptional due to the public demand for vaccination when cases of smallpox occurred elsewhere in the country.

	1961	1962	1963
No. of primary vaccinations undertaken by general practitioners ... ..	4,347	20,920	1,394
No. of re-vaccinations ... ..	1,498	25,296	1,228
TOTAL ... ..	5,845	46,216	2,622
No. of primary vaccinations of children under age of 5 (also included above) ...	3,804	6,089	1,018
No. of children under 2 years vaccinated, expressed as percentage of registered births ... ..	59.6	74.9	13.5

### IMMUNISATION AGAINST DIPHTHERIA

	Primary		Reinforcing	
	1962	1963	1962	1963
No. of immunisations undertaken by: County Council Medical Officers ...	1,892	2,140	4,253	5,059
General Practitioners ... ..	3,543	3,676	1,608	2,263
TOTALS ... ..	5,435	5,816	5,861	7,322

No. of children born in 1962 and 1963 primarily immunised against diphtheria (expressed as a percentage of registered live births during year) ... .. 75.7

No. of children born during period 1954-1958 (i.e. 5-9 years of age) and immunised against diphtheria during 1963 (expressed as a percentage of new school entrants) ... .. 82.9

\*Statistics in this section exclude the Borough of Swindon (unless specifically stated).



Combined immunisation against diphtheria, whooping cough and tetanus was provided unless separate immunisation was desired by the parent or required for medical reasons.

#### IMMUNISATION AGAINST WHOOPING COUGH

	Primary		Reinforcing	
	1962	1963	1962	1963
No. of immunisations undertaken by: County Council Medical Officers ...	1,264	1,544	410	527
General Practitioners ... ..	3,506	3,645	1,285	1,559
TOTALS ... ..	4,770	5,189	1,695	2,086

#### IMMUNISATION AGAINST TETANUS

	Primary		Reinforcing	
	1962	1963	1962	1963
No. of immunisations undertaken by: County Council Medical Officers ...	3,591	3,824	3,522	3,026
General Practitioners ... ..	4,434	4,565	2,336	3,160
TOTALS ... ..	8,025	8,389	5,858	6,186

The following table summarises the work of immunisation against diphtheria, whooping cough and tetanus undertaken during the year.

				Children Born in Years								Total	
				1963	1962	1961	1960	1959	1954-58	1949-53	Before 1949		
PRIMARY	Diphtheria only	...	...	...	—	—	—	—	7	22	1	—	30
	Whooping cough only	...	...	...	—	—	—	—	—	—	—	—	—
	Tetanus only	...	...	...	7	15	66	28	30	1,787	247	426	2,606
	Diphtheria and Whooping Cough combined	...	...	...	—	3	—	—	—	—	—	—	3
	Diphtheria, Whooping Cough and Tetanus combined	...	...	...	2,048	2,863	184	36	17	29	9	—	5,186
	Diphtheria and Tetanus combined				188	63	33	15	22	264	12	—	597
REINFORCING	Diphtheria only	...	...	...	—	142	212	21	30	2,498	16	—	2,919
	Whooping Cough only	...	...	...	—	—	—	—	—	—	—	—	—
	Tetanus only	...	...	...	—	2	7	16	43	878	414	464	1,824
	Diphtheria and Whooping Cough combined	...	...	...	—	—	1	5	4	26	3	2	41
	Diphtheria, Whooping Cough and Tetanus combined	...	...	...	—	278	1,038	281	71	359	17	1	2,045
	Diphtheria and Tetanus combined				—	174	624	144	85	1,237	51	2	2,317



As a further guide to the immunisation state, by the end of 1963, immunisation against diphtheria (and this would in most cases have been combined with immunisation against whooping cough and tetanus) had been completed as follows:—

<i>Children born in:</i>	<i>Immunised against diphtheria by 31.12.63</i>	<i>Percentage of live births</i>
1961	4,782	78.9
1962	4,646	72.7

#### IMMUNISATION AGAINST POLIOMYELITIS

This was extended to provide for children who had had two injections only of Salk vaccine to receive (as an alternative to a third injection) two doses of oral vaccine to complete their basic course. All immunised children entering school are also now offered a reinforcing dose of vaccine and during the year reinforcing doses were offered to immunised persons at special risk.

The following tables give a general view of the work undertaken in 1963:—

#### PERSONS COMPLETING PRIMARY IMMUNISATION

Age Group	No. of persons who have received	
	2nd injection of Salk or 3rd injection of quadruple vaccine	3rd dose of oral vaccine
Children born in 1963 ... ..	8	583
Children born in 1962 ... ..	132	2,960
Children born in 1961 ... ..	71	1,173
Children and young persons born in years 1943-1960 ... ..	58	1,794
Young persons born in years 1933-1942 ...	18	498
Others ... ..	31	680
TOTALS ...	318	7,688

#### PERSONS RECEIVING REINFORCING DOSES

No. of persons given 3rd injections of Salk vaccine or 4th injections of quadruple vaccine	630
No. of persons given 4th injections of Salk vaccine or 5th injections of quadruple vaccine	107
No. of persons given a reinforcing dose of oral vaccine after: 2 Salk doses ... ..	315
3 Salk doses or 3 oral doses or 2 Salk doses plus 2 oral doses ... ..	5,686
TOTAL ... ..	6,741

The following table shows completed immunisation carried out by the end of 1963 in respect of children born in the particular years:—

<i>Children born in:</i>	<i>Number immunised by 31st Dec., 1963</i>	<i>Number of registered live births</i>	<i>Percentage immunised</i>
1963	591	6,821	8.66 %
1962	3,366	6,494	51.83 %
1961	3,610	6,048	59.68 %

It is apparent that there is a very poor response to the offer of immunisation against poliomyelitis, particularly at the age of six months recommended. A letter is sent to parents of all children reaching six months of age but renewed efforts are being made to emphasise the need for children to be protected at an earlier age, as well as to raise the general acceptance of immunisation.

Up to 31st December, 1963, a total of 118,655 persons had received a full course of immunisation.

Records of the immunisation of hospital staff and their families when performed by the hospital medical staff, are not required by the local health authority, but the Department supplied 540 units of oral vaccine to hospitals in 1963 for their staff.

## Ambulance Service

The following table shows the number of patients carried and the mileage undertaken by the Ambulance Service during the year. The comparable figures for 1962 are given in brackets:—

						Patients				Mileage	
						Accident or Emergency		Other			
AMBULANCES:											
County Council Ambulances		...	...			5,104	(5,878)	29,073	(28,003)	303,212	(301,406)
Other Voluntary Ambulances		...	...			295	(322)	1,871	(1,581)	52,515	(44,240)
TOTAL AMBULANCE WORK		...	...			5,399	(6,200)	30,944	(29,584)	355,727	(345,646)
SITTING CASE CARS:											
County Council Cars (includes taxis)		...				321	(641)	11,425	(11,836)	82,702	(92,799)
County Council Cars (dual purpose vehicles)		...	...	...	...	514	(569)	55,559	(47,868)	269,016	(251,229)
County Car Pool		...	...	...	...	9	(14)	69,392	(68,124)	838,637	(790,704)
Other Voluntary Units		...	...	...	...	—	(—)	2,332	(2,188)	12,315	(13,198)
Car Hire		...	...	...	...	—	(1)	1,862	(—)	3,930	(20)
TOTAL SITTING CASE CAR WORK		...				844	(1,225)	140,570	(130,016)	1,206,600	(1,147,950)
Rail Transport						333					

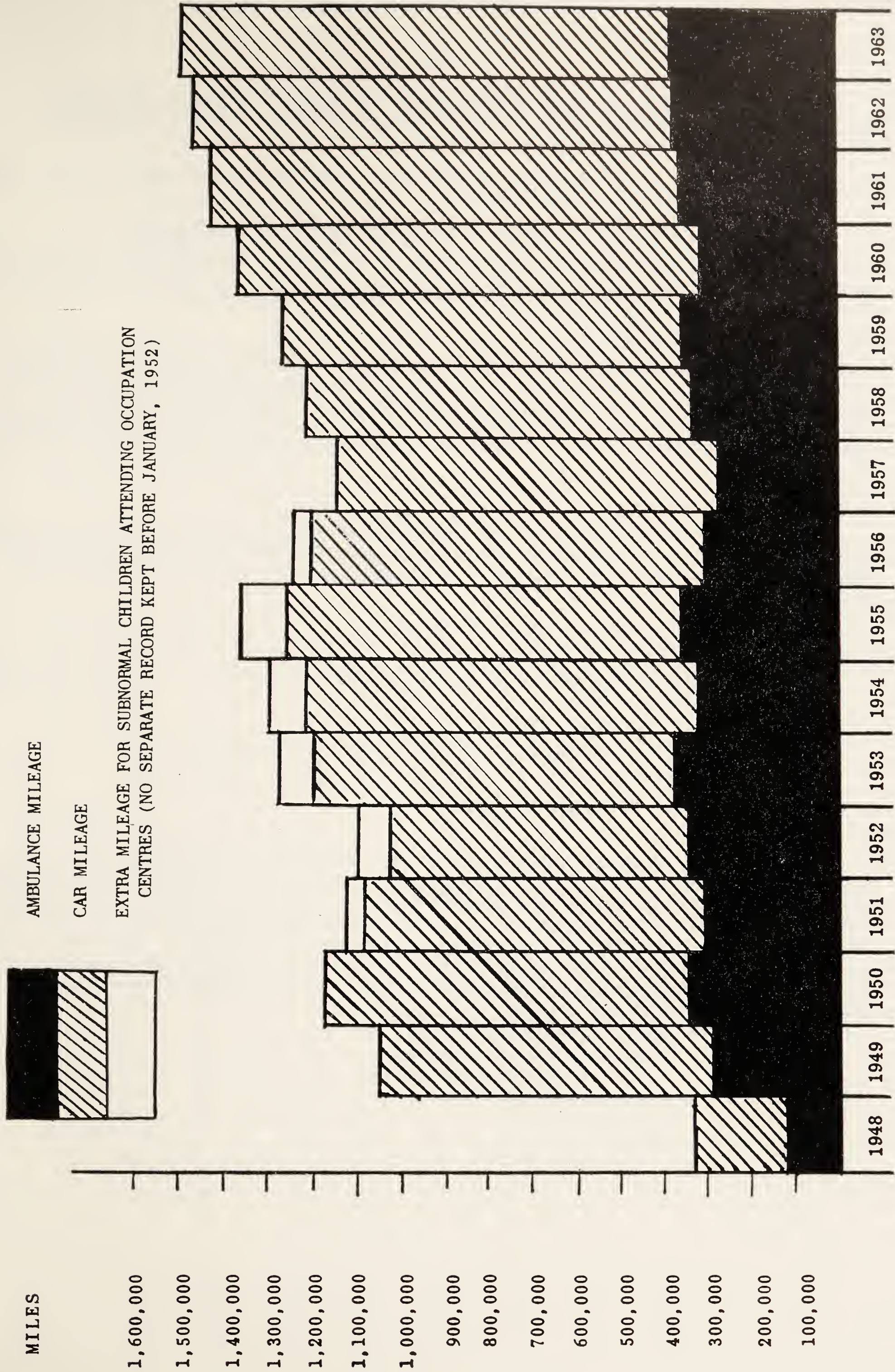
	Increase in Patients over 1962		Increase in Mileage over 1962	
Total ... ..	10,732	6.4%	68,731	4.6%
Carried by County Council Ambulances ...	296	0.8%	1,806	0.6%
Carried by County Council Dual Purpose Vehicles and Cars... ..	6,905	11.3%	7,690	2.2%
Voluntary Ambulances ... ..	407	9.9%	7,392	12.8%
County Car Pool ... ..	1,268	1.8%	47,933	6.6%

The population of the County rose from 439,260 in 1962 to 447,320 (Registrar General's estimate),  
an increase of 8,060 or 1.83%

The medical staff at County Hall gave further instruction to the ambulance staff on the mouth to mouth method of resuscitation. The film "That They May Live" was also shown and practical instruction given with training model.



THE FOLLOWING DIAGRAM SHOWS THE MILEAGE TRAVELLED SINCE THE INCEPTION OF THE SERVICE IN 1948





## \* *Prevention of Illness, Care After-Care*

- (a) Tuberculosis ... } Reports under these headings are made in the relevant sections on  
 (b) Mental Health ... } pages 56 and 53.

(c) Other types of Illness and Follow-up of Patients Discharged from Hospital.

Improved co-operation with the other branches of the National Health Service is one of the most important aims and wherever possible this is encouraged on the basis of local contact between the staff in the field.

### (d) RECUPERATIVE HOLIDAYS

During 1963 arrangements were made for 18 convalescent patients to be admitted to 5 recuperative holiday homes situated on the coast. Two weeks' holiday is normally provided, although this is sometimes extended. The scheme is restricted to patients not needing medical or nursing care, and contributions towards the cost of the holiday are required in accordance with a scale of assessment laid down by the County Council. Travelling arrangements and expenses are the responsibility of the patient.

### (e) SOCIAL CASE WORK

A social worker qualified as an almoner commenced duty at the beginning of the year and has undertaken a wide range of casework where long term social problems of special difficulty have shown themselves, and also where crisis situations have demanded intensive visiting and assistance over a short period.

The following table shows the sources of referral:—

From Health Visitors	...	...	...	...	...	26
District Medical Officers of Health and Assistant County Medical Officers	...	...	...	...	...	13
Educational Psychologists	...	...	...	...	...	3
Mental Welfare Officer	...	...	...	...	...	1
Hospital Almoners	...	...	...	...	...	4
Total	...	...	...	...	...	47

Statistics cannot adequately measure social work, neither is obvious achievement often a guide to what has been accomplished, for results are sometimes not apparent until some time after work has been done. Neither is it possible, except in rare cases, to point to any one cause leading to social breakdown, and usually a number of inter-relating factors must be taken into account. People live in families and communities, and the majority of interviews are therefore made in the context of a home visit where the social situation can be seen as a whole. Bearing these points in mind, the cases referred have arisen because of the need for help with the following predominant factors in a family or individual situation:—

Behaviour problem in a child	...	...	...	12
Difficulties in family relationships	...	...	...	11
Long-term and congenital illness	...	...	...	8
Financial difficulties	...	...	...	6
Housing problems	...	...	...	6
Old age	...	...	...	2
Unmarried mothers	...	...	...	2
Total	...	...	...	47

Of these, four families were already receiving special supervision by the health visitors

Help given by the social worker involves co-operation with colleagues in the Health Department and other departments of the County Council, and with social workers in other fields. These included:

*Wiltshire County Council*

Health Visitors  
Mental Welfare Officers  
Education Welfare Officers  
Child Care Officers  
Area Welfare Officers  
Psychiatric Social Workers

*Statutory and Voluntary Workers*

Hospital Almoners  
Probation Officers  
Housing Managers  
Moral Welfare Workers  
Women's Voluntary Services  
Old People's Welfare Service

Financial assistance is sometimes needed in a crisis, or to help implement a social plan, and grants have been obtained from the following:—

Royal Air Force Benevolent Fund.  
Soldiers', Sailors' and Airmen's Families Association.  
Rotary.  
National Assistance Board.

At the end of the year the state of the cases was as follows:—

Work completed	...	...	...	8
Receiving weekly visits	...	...	...	23
Receiving monthly visits	...	...	...	14
Awaiting first visit	...	...	...	2

(f) HEARING THERAPY

There was a considerable increase in the number of children referred to the Hearing Therapist for assessment and training during the year, as the following tables show. The figures for 1962 are shown in brackets.

Assessment

No. of children under observation at beginning of the year for future pure-tone audiometry following satisfactory preliminary testing by hearing therapist	...	...	...	16	(5)
--	-----	-----	-----	----	-----

Disposal

Audiometry satisfactory	...	...	...	...	3	(2)
Minor hearing loss	...	...	...	...	1	(—)
Observation continuing at end of year	...	...	...	...	12	(3)

New referrals received during the year from:—

<i>Origin</i>				<i>Results</i>			
"At Risk" Register	...	34	(11)	Satisfactory	...	...	25 (14)
Health Visitors (other referrals)	...	21	(6)	Satisfactory. For future P.T.A.	...	...	26 (13)
Otologists	...	17	(4)	Continuing free-field tests	...	...	4 (—)
Paediatricians	...	4	(1)	Conditioning for P.T.A.	...	...	3 (—)
Child Welfare Centres	...	7	(6)	Slightly deaf	...	...	6 (1)
Psychiatrists	...	—	(1)	Severely deaf	...	...	7 (3)
Psychologists	...	2	(—)	Left County	...	...	1 (1)
Family Doctors	...	2	(1)				
Transfers into County	...	1	(2)				
				Total tested	...	...	72 (32)
				Awaiting assessment	...	...	16 (—)
Total	...	88	(32)	Total	.....	...	88 (32)



## Parent guidance and auditory training.

Received training at beginning of the year	...	...	8	(11)
Training commenced during the year	...	...	9	(3)
Total children trained during 1963	...	...	17	(14)

## Disposal during 1963:

Entered schools for the deaf or partially hearing	...	1	(3)
Entered Partially Hearing Unit	...	1	(—)
Commenced at ordinary infants school	...	2	(1)
Died	...	—	(1)
Left the County	...	1	(1)
Training continuing at end of the year	...	12	(8)
Total	...	17	(14)

Total number of children visited for training and assessment	...	88	(48)
Total number of home visits	...	466	(434)
Hospital hearing aids issued	...	7	(1)
Commercial hearing aids purchased	...	1	(2)

A further four speech training units were purchased during the year, bringing the total in use to eight. These are loaned to parents for regular training of the children by them at home. A free-field audiometer was purchased for hearing assessment.

Arrangements were made at the end of the year for the television sets in the homes of three children to be adapted to drive induction loops.

## (g) CHIROPODY

The following tables, with the figures for 1962 in brackets, show the considerable expansion which took place during the year.

## Conditions treated:—

Corns, callouses, etc., not complicated by other physical conditions	744	(571)
Severe nail conditions	75	(52)

## Similar lesions complicated by other physical conditions:—

Diabetes	43	(25)
Sepsis	15	(18)
Severe circulatory disorders	22	(24)
Gangrene	2	(2)

Total patients treated	901	(692)
------------------------	-----	-------

Number of treatments given during year	4,758	(3,463)
--	-------	---------

The following shows patients who commenced treatment in 1963, classified by age groups:—

Age Group	Domiciliary	Clinic
Under 60	25	4
60—	28	14
65—	77	13
70—	73	8
75—	70	7
80—	74	4
85—	22	2
90 and over	6	—
TOTALS	375	52

A fourth chiropodist commenced duty in December, 1963, leaving two vacancies in the establishment one of which was expected to be filled early in 1964. It appears that recruitment to the local health authority chiropody service is becoming easier.

Treatment continued to be provided only for the elderly, the physically handicapped and expectant mothers, and with the increased staff the waiting list of patients for treatment was greatly diminished.

Voluntary organisations continued to provide chiropody services mainly for those able to attend a centre and during the year grants totalling over £1,000 were paid to six of them.

Most of the County Council's direct service has been to patients unable to leave their own homes but clinics were arranged for the County chiropodists at the following centres:—

The County Council Clinics at Corsham and Salisbury.

The College, Froxfield, Marlborough.

The Church Hall, Ogbourne St. George.

Holton House, Corsham.

The Surgery, Nurse's House, Hullavington.

The Village Hall, Ashton Keynes.

During the year 52 patients were treated by directly employed private chiropodists.

The Chiropodists Board set up under the Professions Supplementary to Medicine Act, 1960, invited chiropodists to register by the 30th June, 1963, and the first register will be published by December, 1964. Persons whose applications are accepted will be able to describe themselves as "State Registered" and thus will qualify for employment in the National Health Service.

The Health Committee have agreed that, as and when the staffing position permits, the treatment of patients in County Council welfare homes will be taken over by the County chiropodists to replace private chiropodists employed on a sessional basis. So far, treatment at two homes has commenced.

As a long term aid to recruitment, the County Council has now adopted a scheme for training of chiropodists and one sponsored student commenced the three year course at the Salford School of Chiropody in September. A further student is expected to commence training in 1964.

#### (h) PROVISION OF HOME NURSING EQUIPMENT

During 1963, 1,243 loans were made from the 27 local depots run by the British Red Cross Society and St. John Ambulance Brigade in conjunction with the County Council. In addition 170 loans were made from the central depot at County Hall where larger articles of equipment such as foam rubber mattresses, spinal carriages and wheelchairs etc. are held.

#### (i) B.C.G. IMMUNISATION

The B.C.G. immunisation programme for the year 1962 could not be completed because of the shortage of medical staff, and these arrears had to be dealt with in 1963. On thousand, one hundred and four more children were heaf tested in 1963 than in 1962 and the arrears were reduced; it is estimated that 1,040 children who were entitled to heaf testing were not offered it in 1963 as opposed to 1,382 in 1962. Those not offered immunisation will be given an opportunity to have it in 1964. It is gratifying that the percentage of those entitled to heaf testing who consented to it rose from 54.6 per cent to 62.9 per cent. This is still low but further efforts are being made to improve the rate of acceptance.



The following table shows the extent to which the programme was carried out:—

Type of School or College	Schools at which immunisation carried out		Schools at which immunisation was not carried out	
	No. of Schools	Estimated No. of Persons who were entitled to Heaf Testing	No. of Schools	Estimated No. of Persons who were entitled to Heaf Testing
Maintained ... ..	44	6,536	9	1,040
Independent ... ..	13	606	3	Not known
Approved ... ..	1	Not known	1	Not known
Further Education ...	4	Not known	2	Not known

The results of the heaf testing in schools at which immunisation was carried out were as follows:

	Heaf Tested		Positive		Negative and Immunised
	No.	Percentage of those entitled to Heaf testing (consent rate)	No.	Percentage of those tested	
Maintained ... ..	3,985	60.9	993	24.9	2,992
Independent ... ..	514	84.8	146	26.3	368
Further Education Colleges ...	87	—	42	48.3	45
Approved Schools ... ..	34	—	19	55.1	15
TOTAL ... ..	4,620	62.9	1,200	25.9	3,420

Eighty-five children had unusually strong reactions to the heaf tests and were given appointments at the chest clinic for investigation. The results were as follows:—

Nothing abnormal discovered ... ..	62
Old primary tuberculosis ... ..	2
Old tuberculosis of glands ... ..	2
Kept under observation at clinics ...	8
Old tuberculosis of spine ... ..	1
Appointments not kept ... ..	10
	—
	85

\*The statistics in this section exclude the Borough of Swindon.



## \* *Domestic Help*

The following tables show the growth of the service since 1948, and statistical information on the work done during 1963. Such additional funds as become available annually for expansion of the service are fully taken up by the demand, but the level of help given is still below the national average.

Persons in receipt of old age pensions without additional means, and those with old age and supplementary pensions or in receipt of national assistance, are not expected to make contributions.

Year	Number of Enrolled Part-time Home Helps at end of year	Full-time Equivalent (approx.)	Number of Cases attended during year		
			Maternity	Other	Total
1948	11	8.5	50	7	57
1953	285	43.4	118	386	504
1958	476	56.8	43	582	625
1959	537	59.3	49	665	714
1960	573	80.5	62	809	871
1961	758	101.9	82	952	1,034
1962	1,001	114.0	73	1,119	1,192
1963	1,167	123.0	95	1,286	1,381

### SUMMARY OF CURRENT CASES WHO ON 31ST DECEMBER, 1963, HAD RECEIVED HELP FOR THE PERIODS SHOWN:—

For comparative purposes the figures for the previous year are shown in brackets.

Type of Case	PERIOD OF SERVICE					TOTALS
	3 months and under	Exceeding 3 months	Exceeding 6 months	Exceeding 9 months	Exceeding 12 months	
Maternity ... ..	— (—)	— (—)	— (—)	— (—)	— (—)	— (—)
Ante-Natal and Post-Natal ...	4 (3)	1 (2)	— (—)	— (—)	— (—)	5 (5)
Tuberculosis ... ..	— (2)	— (—)	— (1)	— (—)	5 (4)	5 (7)
Acute Illness ... ..	4 (4)	— (1)	1 (3)	2 (3)	9 (5)	16 (16)
Convalescence following hospital treatment ... ..	9 (7)	3 (1)	1 (2)	— (3)	10 (6)	23 (19)
Chronic illness or disability ...	39 (27)	24 (21)	28 (16)	16 (25)	188 (181)	295 (270)
Aged and Infirm ... ..	67 (52)	42 (43)	58 (42)	33 (56)	344 (371)	544 (564)
Care of Children (mother in hospital, etc.) ... ..	2 (5)	2 (1)	— (—)	— (2)	3 (3)	7 (11)
TOTALS ... ..	125 (100)	72 (69)	88 (64)	51 (89)	559 (570)	895 (892)

SUMMARY OF CASES WHO DURING THE YEAR 1963 HAD RECEIVED HELP BUT SERVICE CEASED BEFORE THE END OF THE YEAR.

Type of Case	PERIOD OF SERVICE					TOTALS
	3 months and under	Exceeding 3 months	Exceeding 6 months	Exceeding 9 months	Exceeding 12 months	
Maternity ... ..	64 (48)	— (—)	— (—)	— (—)	— (—)	64 (48)
Ante-Natal and Post-Natal ...	26 (17)	— (1)	— (1)	— (1)	— (—)	26 (20)
Tuberculosis ... ..	— (—)	— (—)	— (—)	— (1)	— (—)	— (1)
Acute Illness ... ..	12 (11)	5 (1)	2 (—)	3 (1)	— (3)	22 (16)
Convalescence following hospital treatment ... ..	16 (9)	2 (1)	2 (2)	— (2)	— (3)	20 (17)
Chronic illness or disability	32 (23)	9 (8)	14 (1)	4 (8)	42 (27)	101 (67)
Aged and Infirm ... ..	64 (37)	25 (14)	20 (12)	17 (12)	114 (45)	240 (120)
Care of Children (mother in hospital, etc.) ... ..	6 (7)	2 (4)	1 (—)	1 (—)	3 (—)	13 (11)
TOTALS ... ..	220 (152)	43 (29)	39 (16)	25 (25)	159 (78)	486 (300)

#### NIGHT ATTENDANT SERVICE

There was little demand for this service during the year but four patients were assisted for about 336 hours evening service and 35 nights.

\*The statistics under this section exclude the Borough of Swindon, for which information will be found in the Borough Medical Officer's Report.



# *Extract from Report of the Medical Officer of Health for the Borough of Swindon*

(With acknowledgment to the Medical Officer of Health for Swindon, being those portions relevant to the functions for the health services delegated to the Swindon Borough Council under Section 46 of the Local Government Act, 1958. Some references to welfare services, also delegated, are inevitably included, as they are inseparable in the text.)

TO THE CHAIRMAN AND MEMBERS OF THE HEALTH AND WELFARE COMMITTEE OF THE BOROUGH OF SWINDON,

The pattern of public health in Swindon continued in much the same manner as for the previous five years; a steady rise of population, a high birth rate (although not as high as 1962), few deaths from infectious disease, and an increased number of deaths from cancer, heart and circulatory disease. The work of the department was again limited by staff shortages, and these were particularly acute in the domiciliary midwifery, health visiting, and health inspection fields.

A longstanding problem, which did not ease at all during the year, was a shortage of maternity beds. I must express my appreciation for the alacrity with which the Kingshill Maternity Hospital accepts patients booked for home confinements when the situation demands that they be transferred to hospital. An increasing number of patients have had to be discharged earlier than 10 days after delivery, to be nursed in their own homes. This situation is likely to become more acute before more maternity beds become available. These conditions would seem to make an overwhelming case for a full-time midwifery supervisor in Swindon, but at present her services are only available for three half-days weekly.

The extremely severe weather conditions during the early months of the year caused exceptional demands to be made on the health visitors, district nurses, welfare officers and home helps. The response of the staff was most gratifying, and a large number of people, chiefly in the older age groups, were assisted. I must pay particular tribute to the midwives, who, when their cars were immobilised by snow, walked many miles by day and by night to attend their patients.

The enforcement of hygiene standards in shops, restaurants and canteens continued at the highest possible level. As a result, the number of cases of illness attributable to poor hygiene was low.

One new venture, which was a signal success, was the opening of Enterprise Works, a workshop staffed by handicapped people. With the co-operation and support of local industrialists, and the endeavour of the supervisory staff, many people who had never considered themselves employable, or who had been unable to find employment in the open market, are now doing a very worthwhile job of work.

I welcome the opportunity of thanking the staff for a very full year's work, well done and often under difficult circumstances. I would also like to thank the Committee, and particularly the Chairman, for the encouragement, guidance and support I have received during the year.

JAMES URQUHART,

Medical Officer of Health.

## BIRTHS

The live births registered were 2,046 (1,911 legitimate and 135 illegitimate). The live birth rate was 21.27 per 1,000 population.



The birth rate for England and Wales was 18.2. (The comparability factor for Swindon was 0.93).

The 135 illegitimate births represent 6.6 per cent of the total.

Live Births				Males		Females		Total	
Legitimate ...	...	...	...	986	(1,040)	925	(972)	1,911	(2,012)
Illegitimate	...	...	...	66	(56)	69	(53)	135	(109)
TOTALS	...	...	...	1,052	(1,096)	994	(1,025)	2,046	(2,121)

(1962 figures are shown in brackets)

STILLBIRTHS

Forty-four stillbirths were registered in 1963, giving a rate of 21.05 per 1,000 total (live and still) births, compared with 16.23 for 1962 and 23.0 for 1961. The 1962 rate for England and Wales was 17.3.

Stillbirths				Males		Females		Total	
Legitimate ...	...	...	...	20	(16)	18	(16)	38	(32)
Illegitimate	...	...	...	3	(3)	3	(—)	6	(3)
TOTALS	...	...	...	23	(19)	21	(16)	44	(35)

(1962 figures are shown in brackets)

Post-mortem examination of seven babies delivered stillborn in hospital showed the causes of death to be as follows:—

Intra-uterine anoxia	...	5
Tentorial tear	... ..	1
Congenital heart disease		1

INFANT DEATHS

					1963	1962
Deaths of Infants under 1 year old	...				46	45
„ „ „ „ 4 weeks old	...				34	28
„ „ „ „ 1 week old	...				27	21

The causes of the 46 deaths in infants under one year old were as follows:—

Bronchopneumonia	...	10
Congenital defect	...	10
Prematurity	... ..	8
Atelectasis	... ..	6
Asphyxia	... ..	4
Birth Injury	... ..	3
Other causes	... ..	5
		—
		46
		—

	<i>Swindon</i>	<i>England and Wales</i>
Infant Mortality Rate (Deaths under one year per 1,000 live births) ... ..	22.48	20.9 (1963)
Neo-natal Mortality Rate (Deaths under four weeks per 1,000 live births)	16.61	15.1 (1962)
Early neo-natal Mortality Rate (Deaths under one week per 1,000 live births)	13.19	
Perinatal Mortality Rate Stillbirths and deaths under one week per 1,000 live and stillbirths	33.97	30.8 (1962)

#### MATERNAL DEATHS

No deaths were recorded during 1963.

#### DEATHS

The deaths numbered 952 compared with 826 in 1962. For 1963 the crude death rate was 9.9 per 1,000 population. When the comparability factor of 1.25 is used, the death rate is approximately the equivalent of that for England and Wales—12.2.

#### HEALTH EDUCATION

During the year a great deal of health information was disseminated throughout the community. One aspect which was particularly stressed was the prevention of dental caries in children. Mr. Dawson, the Area Dental Officer, spoke to large numbers of people both informally and at organised meetings, and also took part in a television discussion. The decision to bring the content of fluoride in the town's water supply to the recommended level of one part per million has for the present time been postponed, pending the receipt of additional information. Talks were also given on various topics to clubs and social groups by the medical officers, health visiting staff and the public health inspectors. A large quantity of excellent publicity material was received, distributed and exhibited. There were some particularly striking posters on the dangers of cigarette smoking.

I am still convinced that the best method of making a major impact on the community is via the television screen, and that too little use is made of this route for spreading health knowledge.

#### NATIONAL HEALTH SERVICES ACT, 1946—PERSONAL HEALTH SERVICES.

#### AMBULANCE FACILITIES

The Ambulance Service in the Borough is provided by Wiltshire County Council.

#### HEALTH CENTRE

The Health Centre accommodates 10 general practitioner consulting rooms, a pharmacy, dental and chiropody departments, and a welfare food distribution centre. During the year work has been proceeding at the Health Centre to provide examination rooms for the doctors' surgeries and to soundproof all the rooms on the ground floor. A summary of some of the work carried out at the Health Centre Dental Department and pharmacy is given below:—

No. of prescriptions dispensed	...	...	95,882
No. of attendances for dental treatment	...	...	6,974

Scalings and Gum Treatments	FILLINGS		Extractions	X-rays	DENTURES AND APPLIANCES	
	Amalgams	Plastic			Repairs and Relines	Manu- factures
299	1,569	289	2,582	276	759	660



## CHIROPODY

The Chiropody Department at the Health Centre continued to work to the limits of its capacity during 1963. A sharp increase in demand for treatment occurred during the early months of the year. This was probably a result of the extremely severe weather conditions experienced in the district, which led to an increase in cases occurring as a result of impaired circulation. In order to deal adequately with people requiring chiropody treatment attendance is limited to the following priority groups:—

- (a) Those over 65 years of age
- (b) Physically handicapped persons
- (c) Expectant mothers

Total treatments given	...	...	...	...	...	3,039
No. of patients treated during the year	...	...	...	...	...	476
No. of patients under treatment on 31st December, 1963	...	...	...	...	...	468
No. of patients on waiting list on 31st December, 1963	...	...	...	...	...	39

## CARE OF MOTHERS AND YOUNG CHILDREN

## ANTE- AND POST-NATAL CLINICS

Clinics at which a doctor is in attendance are held weekly as follows:—

Beech Avenue	Fridays	1.30 p.m. to 4 p.m.
Bath Road	Mondays	1.30 p.m. to 4 p.m.

	1963	1962
Number of women who attended these clinics during the year	312	496
Number of attendances made during the year	1,426	2,594

## CARE OF PREMATURE INFANTS

Premature baby units are maintained at both Kingshill Maternity Hospital and at Wroughton R.A.F. Hospital.

When a premature baby born at home is deemed to require the special care and nursing provided by the premature baby unit, both mother and child are admitted to hospital. The ambulance station is equipped with a portable incubator for the transport of these babies to hospital.

It will be seen from the table given below that of the 134 premature babies born during the year 18 did not survive the first month of life, and of these eight died within 24 hours of birth.

	1963	1962
Number of premature babies born:		
(i) At home	29	29
(ii) In hospital or nursing home	105	103
Number who died during the first 24 hours:		
(i) Born at home	1	1
(ii) Born in hospital or nursing home	7	6
Number who survived at end of one month:		
(i) Born at home	27	28
(ii) Born in hospital or nursing home	89	91

## DENTAL CARE OF EXPECTANT AND NURSING MOTHERS AND YOUNG CHILDREN

	<i>Examinations</i>	<i>Treated</i>
Expectant and Nursing Mothers and children under school age	232 (114)	76 (81)

Figures in brackets are for 1962



### INFANT WELFARE CLINICS

Details of the Infant Welfare Clinics held and the attendances at each throughout the year are recorded in the table given below:—

Centre	Day and Time, 2—4.30 p.m.	Number of consultations with doctor	Number of attendances
61 Eastcott Hill ... ..	Wednesday and Friday	1,388	5,791
Beech Avenue, Pinehurst ...	Tuesday ... ..	859	2,062
Gorse Hill ... ..	Wednesday ... ..	749	2,066
Rodbourne Cheney ... ..	Monday ... ..	607	1,729
Bath Road ... ..	Friday ... ..	762	2,151
Penhill... ..	Tuesday ... ..	606	2,050
Park South—Priory Road ...	Tuesday and Thursday	1,092	5,104
Walcot—Common Room ...	Monday ... ..	377	1,710
Walcot—Boys' Club (discontinued 19.9.63) ...	Thursday ... ..	—	509
Rodbourne Road ... .. (commenced 18.9.63)	Thursday ... ..	146	612
TOTAL—All Centres ... ..		6,586	23,782

### WELFARE FOODS

Welfare foods are distributed at all Child Welfare Clinics and at the Health Centre. Proprietary foods are available at Child Welfare Clinics but not at the Health Centre.

Welfare Foods	Health Centre Issues	Clinic Issues
National Dried Milk ...	15,011 tins (17,947)	13,261 (14,218)
Cod Liver Oil ... ..	645 bottles (736)	1,547 (1,417)
Vitamin Tablets ... ..	977 packets (1,189)	1,103 (1,174)
Orange Juice ... ..	6,621 bottles (6,534)	10,113 (10,264)

Figures in brackets—1962 Issues

During 1963 38,300 sales of proprietary food realising £5,017 16s. 0d. were made  
(During 1962 36,488 sales of proprietary foods realising £4,814 15s. 8d. were made)

### DAY NURSERIES AND CHILD MINDERS

The day nursery at Gorse Hill Community Centre provides 25 places.

Priority is given to parents who require placement of their children for social reasons. Meals continue to be provided by the nursery staff and the menus are scrutinised by the inspecting Medical Officer.

The following table summarises the position of the Local Health Authority Nursery:—

	Number of Nurseries	Number of Approved Places	Number of children on the Register at the end of the year		Average daily attendance	
			0—2	2—5	0—2	2—5
Nurseries maintained by the Council ... ..	1	25	2	14	1	11

#### NURSERIES AND CHILD MINDERS REGULATIONS ACT

Two new registrations providing 41 places were made during the year 1963. Three other establishments continued to be registered, and provided a total of 67 places between them.

#### NOTIFICATION OF BIRTHS

Actual number of births in the Authority's area during the year as notified under Section 203 of the Public Health Act, 1936, or Section 255 of the Public Health (London) Act, 1936, and the number as adjusted by any notifications transferred in or out of the area:—

(1)	Live Births		Stillbirths		Totals	
	Actual (2)	Adjusted (3)	Actual (4)	Adjusted (5)	Actual (6)	Adjusted (7)
(a) Domiciliary ... ..	855	856	2	2	857	858
(b) Institutional ... ..	1,425	1,151	55	41	1,480	1,192
(c) Total ... ..	2,280	2,007	57	43	2,337	2,050

One hundred and thirty-four more births occurred in Swindon during 1963 compared with 1962.

#### MIDWIFERY SERVICE

There is an establishment of 15 domiciliary midwives in Swindon. At no time during 1963 was this establishment filled. Eight midwives are approved as teachers of pupil midwives, and during the year 22 pupils from Swindon Maternity Hospital and Bradford on Avon Maternity Hospital completed their district training.

Midwives booking clinics are held as follows:—

81 Bath Road ... 2nd and 4th Wednesday in each month at 6—7 p.m.  
 Pinehurst Clinic ... 1st and 3rd Thursday in each month at 2—4 p.m.  
 Penhill Clinic ... 1st and 3rd Wednesday in each month at 2—4 p.m.  
 Priory Road Clinic 1st and 3rd Tuesday in each month at 6—7 p.m.

#### ANTE-NATAL CLINICS:

81 Bath Road ... Monday at 1.30 p.m.  
 Pinehurst Clinic ... Friday at 1.30 p.m.

The domiciliary midwives were again kept working to the limits of their capacity. Under-staffed and lacking the support of a full-time supervisor, they nevertheless coped magnificently with a vast amount of work. They received excellent support from the Public Health Department office staff, who accepted and relayed calls and coped with emergency situations with maximum efficiency.

Early discharge of hospital booked patients, to be nursed at home following delivery, further increased their burden. Until further midwifery beds become available at local hospitals this problem will remain.



MOTHERCRAFT AND RELAXATION CLASSES were held at Pinehurst and Priory Road Clinics and were attended by 122 expectant mothers.

MEDICAL AID FORMS RECEIVED FROM MIDWIVES:

Medical helps	...	...	...	152
Stillbirths	...	...	...	1
Deaths of mothers	...	...	...	Nil
Deaths of children	...	...	...	Nil
Liability to be a source of infection				6

	Number of Deliveries attended by Midwives in the Area during the Year			
	Domiciliary Cases		Totals	Cases in Institutions
	Doctor not booked	Doctor booked		
(a) Midwives employed by the Authority	4	850	854	—
(b) Midwives employed by voluntary organisations:—				
(i) Under arrangements with the Local Health Authority in pursuance of Sec. 23 of the National Health Service Act, 1946	—	—	—	—
(ii) Otherwise (including hospitals not transferred to the Minister under the National Health Service Act)	—	—	—	—
(c) Midwives employed by hospital management committees or Board of Governors under the National Health Service Act	—	—	—	1,451
(d) Midwives in private practice (including midwives employed in nursing homes)	—	—	—	—

#### HEALTH VISITING

In addition to home visiting, Health Visitors give advice on mothercraft at Infant Welfare Clinics, and during 1963 there were eleven clinic sessions per week. Other important facets of the Health Visitor's work are visiting old people, supervising problem families, infectious disease inquiries, finding out why schoolchildren have failed to attend appointments with consultants, visiting child minders, school hygiene inspections and attendance at immunisation sessions. The Health Visitor thus has a unique opportunity for health education of the community by her personal contact with all ages and social groups.

Although handicapped by under-staffing, the number of home visits rose by over 40 % compared with 1962. This was achieved by using trained nurses instead of health visitors for such routine tasks as school medical inspections and minor ailment clinics. This left the Health Visitor more time to use her special training and skills in other fields.

#### NUMBER OF VISITS PAID BY HEALTH VISITORS DURING 1963

	Total Visits
Expectant Mothers	4
Children under one year	5,311, including 2,029 first visits
Children between 1—5 years	5,995
Other visits	1,027
<b>TOTAL VISITS</b>	<b>12,337</b>

(Total visits for 1962—7,627)

HOME NURSING

The following table summarises the number and type of cases to which the domiciliary nurses were called during the year.

						<i>No. of Cases</i>
Respiratory diseases (excluding tuberculosis)	...	...	...	...	...	74
Digestive diseases	...	...	...	...	...	53
Heart disease	...	...	...	...	...	51
Circulatory disease	...	...	...	...	...	146
Genito-urinary disease	...	...	...	...	...	70
Skin	...	...	...	...	...	12
Ear, eye and other sense organs	...	...	...	...	...	13
Cancer	...	...	...	...	...	41
Cerebral lesions of vascular origin	...	...	...	...	...	62
Infections and parasitic diseases	...	...	...	...	...	15
Diabetes	...	...	...	...	...	23
Injuries	...	...	...	...	...	22
Tuberculosis	...	...	...	...	...	15
Bones, joints and movement (mainly rheumatism)	...	...	...	...	...	30
Pregnancy	...	...	...	...	...	37
Mental and other nervous diseases	...	...	...	...	...	8
Other diseases or ill-defined	...	...	...	...	...	339
						1,011

in respect of which 22,323 visits were made.

POLIOMYELITIS IMMUNISATION, 1963

PRIMARY IMMUNISATION

Age Group								Number of persons who have received		
								Salk Vaccine	Oral Vaccine	TOTAL
								Second injection	Third dose	
(a)	Children born in 1963	...	...	...	...	...	...	2	341	343
(b)	Children born in 1962	...	...	...	...	...	...	10	993	1,003
(c)	Children born in 1961	...	...	...	...	...	...	5	214	219
(d)	Children and young persons born in year 1943-1960	...	...	...	...	...	...	19	439	458
(e)	Young persons born in years 1933-42	...	...	...	...	...	...	10	88	98
(f)	Others	...	...	...	...	...	...	20	87	107
(g)	Total	...	...	...	...	...	...	66	2,162	2,228

REINFORCING DOSES

(a)	Number of persons given 3rd injections of Salk Vaccine	200
(b)	Number of persons given 4th injections of Salk Vaccine	63
(c)	Number of persons given a reinforcing dose of oral vaccine after 2 Salk doses	698
	3 Salk doses or 3 Oral doses or 2 Salk doses plus 2 Oral doses	2,263



# IMMUNISATION AGAINST DIPHTHERIA, WHOOPING COUGH AND TETANUS, 1963

	<i>Local Health Authority 1963</i>	<i>General Prac- titioner 1963</i>
<i>Diphtheria alone:</i>		
Number of children who have completed primary course	14	1
Number of children given boosters ... ..	244	24
<i>Diphtheria, Whooping Cough and Tetanus combined:</i>		
Number of children who have completed primary course	794	803
Number of children given boosters ... ..	480	486
<i>Diphtheria and Tetanus combined:</i>		
Number of children who have completed primary course	149	18
Number of children given boosters ... ..	180	140
<i>Tetanus alone:</i>		
Number of persons who have completed primary course	171	78
Number of persons given boosters ... ..	123	81
	<u>2,155</u>	<u>1,631</u>

## SMALLPOX VACCINATION, 1963

	Under 1 Year	1—4 Years	5—14 Years	15 Years and over	TOTAL
Primary Vaccination ... ..	33	264	34	68	399
Re-Vaccination ... ..	—	27	21	183	231
TOTALS ... ..	33	291	55	251	630

## PREVENTION OF ILLNESS, CARE AND AFTER-CARE

- |  |  |
|--|--|
| (1) Tuberculosis ... ..                  | } Reports under these<br>headings are made in<br>the relevant Sections<br>of this report |
| (2) Mental Health ... ..                 |  |
| (3) Immunisation ... ..                  |  |
| (4) Provision of Medical Loan Appliances |  |

Three convalescent or recuperative holidays were provided during 1963.

## CARE OF OLD PEOPLE

During the year the employment of clinic nurses enabled the Health Visitors to devote more time to home visits. Thus we were able to supervise more closely many old people and to afford them more help with their problems.

The shortage of beds for the chronic sick and the sometimes long wait for Welfare Home places does entail hardship for old people needing institutional care, as the statutory and voluntary services cannot always adequately provide for them in their own homes.

At the end of December, 1963, there were 420 single-bedroom council houses, bungalows or flats occupied by old people. The number includes the 27 grouped flats for old people which were completed on Queens Drive during the year. These are proving very popular with their occupants, and the fact that they are in direct contact by loudspeaker with the warden gives them a considerable measure of confidence.

The Meals on Wheels Service which is run by the W.V.S. increased its distribution of meals from 30 to 112 per week from October, 1963. This was made possible by securing the use of the domestic science kitchen at the Lincoln Street College annexe and by the gift of a second van and kitchen equipment from the Round Table. The kitchen at Craven House is no longer used to prepare the meals, but the dining club for old people is still held there.

The cheap laundry service provided by a local firm for old people recommended to them through this department provides for an average of 40 households.

The Old People's Welfare Committee continues to provide a visiting service and these visitors bring to our notice many who are in need of our services.

#### EVENING AND NIGHT ATTENDANCE SERVICE

During 1963 there were four cases requesting night attendance and this was supplied for a total of 22 nights.

#### HOME HELP SERVICE

One hundred and one home helps were employed, 24 working whole-time and 77 part time.

A summary of the work of the Home Help Service during the year is given.

Number of home helps available at the end of the year	101	(95)
---	-----	------

Number of householders helped during the year:—

(a) Maternity cases	...	97	(139)
(b) Other cases	...	571	(554)
TOTAL	...	668	(693)

Number of hours of assistance provided during the year:—

(a) Maternity cases	...	5,794	(7,531)
(b) Other cases	...	106,434	(109,246)
TOTAL	...	112,228	(116,777)

Number of cases in which full fee was not charged	...	608	(650)
---	-----	-----	-------

Number of hours lost during the year through sickness	7,160	(6,477)
---	-------	---------

(Figures for 1962 are given in brackets)



## MEDICAL LOAN APPLIANCES

A large range of nursing and invalid aid appliances is maintained at the Health Centre and is available on loan when required. A small loan charge is levied for such appliances.

Appliance	Number issued on payment (New Issues)	Number issued on free loan (New Issues)
Bed Pans (including 5 rubber pans) ...	749	1
Waterproof Sheets ...	693	—
Air Rings ...	69	—
Bed Rests ...	70	—
Invalid Chairs ...	61	—
Urinals ...	59	—
Bed Cradles ...	21	1
Sick Feeders ...	10	—
Crutches (pairs) ...	13	—
Bed Hoists ...	1	1
Air Beds ...	—	—
Commodes ...	15	3
Walking Sticks ...	10	—
Diabetic Spring Balance ...	—	—
Steam Kettles ...	—	—
Inhalers ...	—	—
Guthrie Smith Chair ...	—	1
Dunlopillo Mattresses ...	—	—
Enuresis Alarms ...	2	—
Bed Tables ...	—	—
Breathing Frames ...	—	—
Hot Water Bottles (stone) ...	1	—
Bedsteads (hospital type) ...	—	1

Hire payments received for appliances during the year ended 31.12.63 ... £255 17s. 1d.

Hire payments received for appliances during the year ended 31.12.62 ... £251 13s. 9d.

## MENTAL HEALTH SERVICES

## STAFF

The establishment was increased in May, when a further Mental Welfare Officer with a Diploma in Social Science was appointed, and now comprises one Senior Mental Welfare Officer and four Mental Welfare Officers.

A 24-hour service is maintained and outside office hours this is worked in conjunction with the North Wilts Area Officers; all after-duty emergency calls being channelled through the Health Centre.

## SUMMARY OF MENTAL HEALTH WORK FOR THE YEAR

Admissions to Hospitals ...	351
Home Visits ...	4,782
Office Interviews ...	2,783

The following tables show the number of hospital admissions effected by Mental Welfare Officers under the Mental Health Act, 1959.

## BOROUGH AREA

	Informal			Sec. 25			Sec. 26			Sec. 29			Sec. 60			TOTAL		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Borough Officers	101	158	259	16	13	29	5	4	9	18	20	38	—	—	—	140	195	335
N. Wilts Officers ...	8	6	14	—	—	—	—	—	—	6	5	11	—	—	—	14	11	25
TOTAL ...																360		

## NORTH WILTS AREA

	Informal			Sec. 25			Sec. 26			Sec. 29			Sec. 60			TOTAL		
	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T	M	F	T
Borough Officers ... ..	3	3	6	1	—	1	—	—	—	4	5	9	—	—	—	8	8	16

The following table gives details of patients referred to Swindon Mental Health Service during the year.

Referred by	Mental Illness	Psycho-pathic	Sub-Normal	Severely Sub-Normal	TOTAL
General Practitioners ... ..	274	—	3	—	277
Hospitals, on discharge from I.P. treatment ...	61	—	2	—	63
Hospitals, after or during O.P. or day treatment	112	—	2	—	114
Local Education Authority ... ..	—	—	3	4	7
Police and Courts... ..	30	—	—	—	30
Other Sources ... ..	298	—	11	1	310
TOTAL ...					801

At the end of 1963 478 patients (including two under guardianship) were under care. The following table gives their classification.

Mental Illness	Psycho-pathic	Sub-Normal	Severely Sub-Normal	TOTAL
228	—	184	66	478



## *Mental Health Services*

During the year the following projects in the development scheme came into operation.

Trowbridge Adult Training Centre and Trowbridge Junior Training Centre ... ..					Opened 4th February
Salisbury Hostel for Mentally Subnormal Men ...					Received first patients on 1st October.
Salisbury Adult Training Centre ... ..					Opened 12th December.

The new junior training centre buildings have enabled children to be divided into ability groups and supervisors and their assistants have been able to put into operation planned programmes of training which were impossible in the old single room type of building which had to cope with all age levels, including the adults.

The adult centres with their workshop facilities have provided great social benefit to subnormal persons and undoubtedly provide congenial constructive and properly directed adult occupation which had been lacking for many of the trainees in the past. The scope of the work undertaken has improved considerably, although the response from industry varies between different centres and the range of articles made for departments of the County Council should also be increased.

It is disappointing to record that no sites became available during the year for a mental health centre and other projects in Salisbury. There is a need for mental health provisions in the City and in particular there could be good possibilities for such a centre and it is to be regretted that, in the second largest town of the County, this project had to be still further deferred.

The problem of sites generally is a difficult one to solve if establishments are to be placed in the right surroundings. This is particularly the case with regard to hostels where it is desirable that they should be within a residential area if the hostel residents are to be integrated with the general community. A site has been acquired for a small hostel in Calne and another at Melksham but in other parts of the County, after considerable effort, no success has been achieved in obtaining adequate sites.

Towards the end of the year the home teacher for mentally handicapped persons resigned. During recent years the instruction given by the home teacher had been almost entirely to adults and with the opening of new adult training centres the amount of work available for the home teacher would become so limited that it was decided not to renew the appointment but instead to endeavour to recruit an occupational therapist who might help with some of the mentally ill as well as the mentally subnormal, and, in addition, work in the various hostels as they become available.

During the year two short courses, each of three days duration, for training centre staffs were arranged at Urchfont Manor. The first of these courses was a specialised course in the use of music in junior training centres for the mentally handicapped: this aroused considerable enthusiasm and it would appear to have opened up several new approaches for training. The necessary equipment is being obtained and the development of the systems advocated at the course will be tried during the coming year. The second course was for the staffs of adult training centres and again the content, more varied than that for the junior centres course, was much appreciated by the staff, many of whom had only recently started to work with mentally handicapped persons.

The following tables show in concise form the preventive and after-care work undertaken during the year.

It is interesting that during the year the number of cases referred to the mental health services by general medical practitioners increased from 298 to 329, and for hospital referrals from 234 to 376. The total referrals were 227 more than for 1962.

The number of patients under supervision by mental welfare officers increased from 1,076 in 1962 to 1,154 in 1963.

It will also be seen from the return of work for mental welfare officers that the number of visits, interviews, etc., increased during the year by 2,731 (23 %).

Although one additional mental welfare officer was appointed in March, 1963, one senior mental welfare officer was attending a whole-time training course until the end of July and a second senior mental welfare officer commenced a year's residential training course at the end of September. An effort was made to fill on a temporary basis the vacancies created by the attendance of these officers at courses, but for about four months of the year the service operated without replacements for these two senior positions owing to the difficulty of recruiting suitable applicants. The increases in work achieved are, therefore, particularly encouraging. The extra referrals received during the past year appear to show that there is need for additional community support and that patients will be brought to the notice of the mental health service when general practitioners and doctors in hospital feel that such work can be adequately undertaken.

With the expanding services now being provided for the mentally disordered, it is hoped to encourage doctors to visit the hostels and training centres to see for themselves the kind of service being provided.



“CASE BOOK SUMMARY” OR STATE (i.e. NO. OF PATIENTS BY CATEGORIES) AS AT THE END OF YEAR

								Mentally Ill				Psychopathic				Subnormal				Sev. Subnormal				TOTALS					
								Under 16		Over 16		Under 16		Over 16		Under 16		Over 16		Under 16		Over 16		Under 16		Over 16			
								M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F		
No. of patients under Guardianship of the County Council ... ..								—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—				
No. of patients under Guardianship of Others ... ..								—	—	—	—	—	—	—	—	—	—	—	—	3	2	—	—	3	2				
No. attending Junior (Day) Training Centres ... ..								—	—	—	—	—	—	—	—	16	10	9	10	41	20	8	7	57	30	17	17		
No. awaiting training at Junior (Day) Training Centres ... ..								—	—	—	—	—	—	—	—	1	1	—	1	1	—	—	—	2	1	—	1		
No. attending Adult (Day) Training Centres ....								—	—	2	—	—	—	—	—	1	—	9	13	—	—	32	21	1	—	43	34		
No. awaiting training at Adult (Day) Training Centres ... ..								—	—	—	—	—	—	—	—	—	—	—	—	—	2	2	—	—	—	2	2		
No. receiving training at Junior (Residential) Establishments ... ..								—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
No. awaiting "								—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
No. receiving "								—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
No. awaiting "								—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
No. receiving home training ... ..								—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
No. awaiting home training ... ..								—	—	—	—	—	—	—	—	—	—	1	1	—	5	14	—	1	—	5	15		
No. attending Special Care Unit ... ..								—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
No. awaiting attendance at Special Care Unit ... ..								—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
No. resident in County Council Hostels (a) Sarum House ... ..								—	—	—	—	—	—	—	—	—	—	—	—	—	4	—	—	—	—	4	—		
(b) ..... ..								—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
(c) ..... ..								—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
(d) ..... ..								—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
No. awaiting residence in C.C. Hostels (a) ..... ..								—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
(b) ..... ..								—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
(c) ..... ..								—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
(d) ..... ..								—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
No. resident at C.C. expense in private hostels and other establishments ... ..								—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1			
No. boarded out at C.C. expense in private households ... ..								—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	2			
No. under supervision (friendly) by (a) Mental Welfare Officer ... ..								—	—	173	240	—	—	15	3	27	13	226	157	49	29	119	103	76	42	533	503		
(b) Health Visitor ... ..								—	—	—	—	—	—	—	—	—	—	2	1	—	1	—	1	—	—	2			
(c) Voluntary Visitor ... ..								—	—	—	—	—	—	—	—	—	1	—	—	1	—	1	—	—	2				
(d) Children's Committee ... ..								—	—	—	—	—	—	—	—	—	3	—	—	—	—	—	—	—	3	—			
(e) Probation Officer ... ..								—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1	—			
No. awaiting admission to hospital (a) urgent need ... ..								—	—	—	—	—	—	—	—	1	—	—	2	6	5	2	3	7	5	2	5		
(b) not urgent need ... ..								—	—	—	—	—	—	—	—	—	—	4	2	—	—	—	1	—	—	4	3		
Others, including not yet visited ... ..								—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—			

## RECORD OF CASES REFERRED FOR ACTION DURING THE YEAR AND SUMMARY OF ACTION TAKEN

No. of persons referred who at time of referral were not on case list of Wiltshire or any other L.H.A.—922.	Mentally Ill				Psychopathic				Subnormal				Sev. Subnormal				TOTALS			
	Under 16		Over 16		Under 16		Over 16		Under 16		Over 16		Under 16		Over 16		Under 16		Over 16	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Of the above No. not previously known to the service—356.																				
Referred by—																				
General Medical Practitioner ...	—	—	143	178	—	—	—	—	1	1	4	2	—	—	—	—	1	1	147	180
Hospital and Specialist Service ...	—	1	136	221	—	—	—	—	1	—	13	2	—	—	2	—	1	1	151	223
Courts ...	—	—	1	1	—	—	—	—	—	—	1	—	—	—	—	—	—	—	2	1
Education Committee: (a) Sec. 57 (3) ...	—	—	—	—	—	—	—	—	1	1	—	—	4	—	—	—	5	1	—	—
(b) School Leavers ...	—	—	—	—	—	—	—	—	9	3	3	3	—	—	—	—	9	3	3	3
Relatives ...	—	—	7	14	—	—	—	—	3	1	—	2	—	1	—	—	3	2	7	16
Police ...	—	—	26	23	—	—	—	—	—	—	1	2	—	—	—	—	—	—	27	25
National Assistance Board ...	—	—	2	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	3	1
Health Visiting Service ...	—	—	1	1	—	—	—	—	1	1	1	—	1	—	—	—	2	1	2	1
Others ...	1	—	29	42	—	—	—	—	4	5	7	12	—	—	—	—	5	5	36	54
																	26	14	378	504
How dealt with: Advice only to (a) Patient ...	—	—	67	83	—	—	—	—	—	—	1	3	1	—	—	—	1	—	68	86
(b) Relatives ...	—	—	15	22	—	—	—	—	3	2	3	3	—	1	—	—	3	3	18	25
(c) Referring Agency ...	1	1	22	40	—	—	—	—	1	2	11	1	—	—	—	—	2	3	33	41
Added to Case Load and—																				
(a) Admitted to Hospital (i) Informally ...	—	—	139	172	—	—	—	—	—	—	—	—	—	—	—	—	—	—	139	172
(ii) Compulsorily ...	—	—	48	68	—	—	—	—	—	1	2	—	—	—	—	—	—	1	50	68
(b) Placed under Guardianship of (i) Local Health Authority ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(ii) Person other than L.H.A. ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(c) Placed under friendly supervision (prevention care and after-care, etc.) ...	—	—	53	95	—	—	—	—	15	7	15	17	5	—	2	—	20	7	70	112
Removed or died before dealt with ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Not dealt with by date of this statement... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
																	26	14	378	504

## MISCELLANEOUS STATISTICS FOR THE YEAR

	Mentally Ill				Psychopathic				Subnormal				Sev. Subnormal				TOTALS			
	Under 16		Over 16		Under 16		Over 16		Under 16		Over 16		Under 16		Over 16		Under 16		Over 16	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
GUARDIANSHIP																				
No. of patients placed under guardianship of Local Health Authority—																				
Section 33	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Section 41 (2) (b)...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Section 60 or 61	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Section 79	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Section 87	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
No. of patients placed under guardianship of persons other than L.H.A.—																				
Section 33	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Section 41 (2) (b)...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Section 60 or 61	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Section 79	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Section 87	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
No. of patients transferred to hospital																				
Discharges from Guardianship—																				
by Mental Health Review Tribunal																				
by Responsible Medical Officer																				
by nearest relative																				
by Secretary of State																				
PATIENTS ADMITTED TO HOSPITALS FOR THE MENTALLY SUBNORMAL																				
To permanent beds																				
For temporary care under Circular 5/52 to—																				
(a) N.H.S. Hospitals																				
(b) Other Hospitals																				
SUPERVISION WITHDRAWN																				
Recovered or stabilized																				
Died																				
Removed from Area																				
Other reasons																				
Placed under friendly supervision from Guardianship																				





# RETURN OF WORK FOR MENTAL WELFARE OFFICERS DURING 1962 AND 1963

		During Office Hours								TOTALS		Outside Office Hours								TOTALS			
		Under 16				Over 16				1962	1963	Under 16				Over 16				1962	1963		
		Male		Female		Male		Female				Male		Female									
		1962	1963	1962	1963	1962	1963	1962	1963			1962	1963	1962	1963								
1.	Interviews at Mental Health Offices	...	...	50	36	30	8	368	329	400	423	848	796	—	—	—	—	—	—	—	—	—	—
2.	Attendances at Case Conferences, Clinics and Meetings (shown as cases discussed)	...	...	33	22	32	13	742	1293	1060	1692	1867	3020	—	—	—	—	28	37	39	41	67	78
3.	Visits to Police, Probation Office, Ministry of Labour, National Assistance Board, etc. (shown as cases discussed)	...	...	31	22	14	8	439	447	333	429	817	906	—	1	—	27	20	35	23	63	43	
4.	Attendances at Courts	...	...	—	—	—	—	11	17	4	3	15	20	—	—	2	—	—	—	—	—	—	—
5.	Visits to relatives only	...	...	12	32	11	21	180	476	136	293	339	822	1	6	—	33	63	45	52	79	123	
6.	Statutory visits to patients under Guardianship	...	...	—	—	—	—	23	52	38	29	61	81	—	—	—	—	3	5	1	5	4	
7.	Home visits of friendly supervision	...	...	217	201	148	116	908	901	604	808	1877	2026	13	10	11	81	100	59	60	164	176	
8.	Preventive and after-care visits, etc.	...	...	5	11	14	10	1006	926	1360	2014	2385	2961	2	1	—	2	115	183	108	283	469	
9.	Other home visits	...	...	14	11	9	5	112	111	145	104	280	231	—	2	—	27	24	56	26	83	53	
10.	“No Access” visits (not to be included elsewhere)	...	...	37	34	27	27	333	379	336	283	733	723	1	1	2	20	27	19	15	42	43	
11.	Visits to patients in hospital	...	...	—	7	1	5	49	97	75	139	125	248	—	1	—	19	20	28	41	47	64	
12.	Visits to patients in hostels	...	...	—	—	—	—	12	5	1	2	13	7	—	—	—	4	1	3	3	7	4	
13.	Admissions to hospital:— Compulsory, Section 25 Section 26 Section 29 Part V Section 40 Informal	...	...	—	2	—	—	8	10	24	20	32	32	—	—	1	14	3	10	9	24	13	
		...	...	—	—	—	—	8	7	14	3	22	10	—	—	—	1	2	3	2	4	4	
		...	...	—	1	—	—	18	24	36	25	54	50	—	—	1	23	37	30	29	53	67	
		...	...	—	—	—	—	3	—	2	—	5	—	—	—	—	—	—	—	—	—	—	
		...	...	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	
		...	...	1	3	6	2	123	120	190	158	320	283	—	—	2	44	73	61	69	107	143	
14.	Assessment Clinic	...	...	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	
15.	Admissions to hostels	...	...	—	—	—	—	—	4	1	1	1	5	—	—	—	—	—	3	1	3	1	
												9794	12223								973	1285	

# Tuberculosis

## NOTIFICATIONS

Primary notifications of tuberculosis received during 1963 and corresponding incidence rates are shown in the following table, together with those for two previous years selected at five yearly intervals.

Year	Number of Primary Notifications			Incidence Rate per 1,000 of Population		
	Respiratory Tuberculosis	Non-Respiratory Tuberculosis	Tuberculosis (all forms)	Respiratory Tuberculosis	Non-Respiratory Tuberculosis	Tuberculosis (all forms)
1953	329	49	378	0.84	0.12	0.96
1958	162	41	203	0.4	0.10	0.50
1963	108	24	132	0.24	0.05	0.29

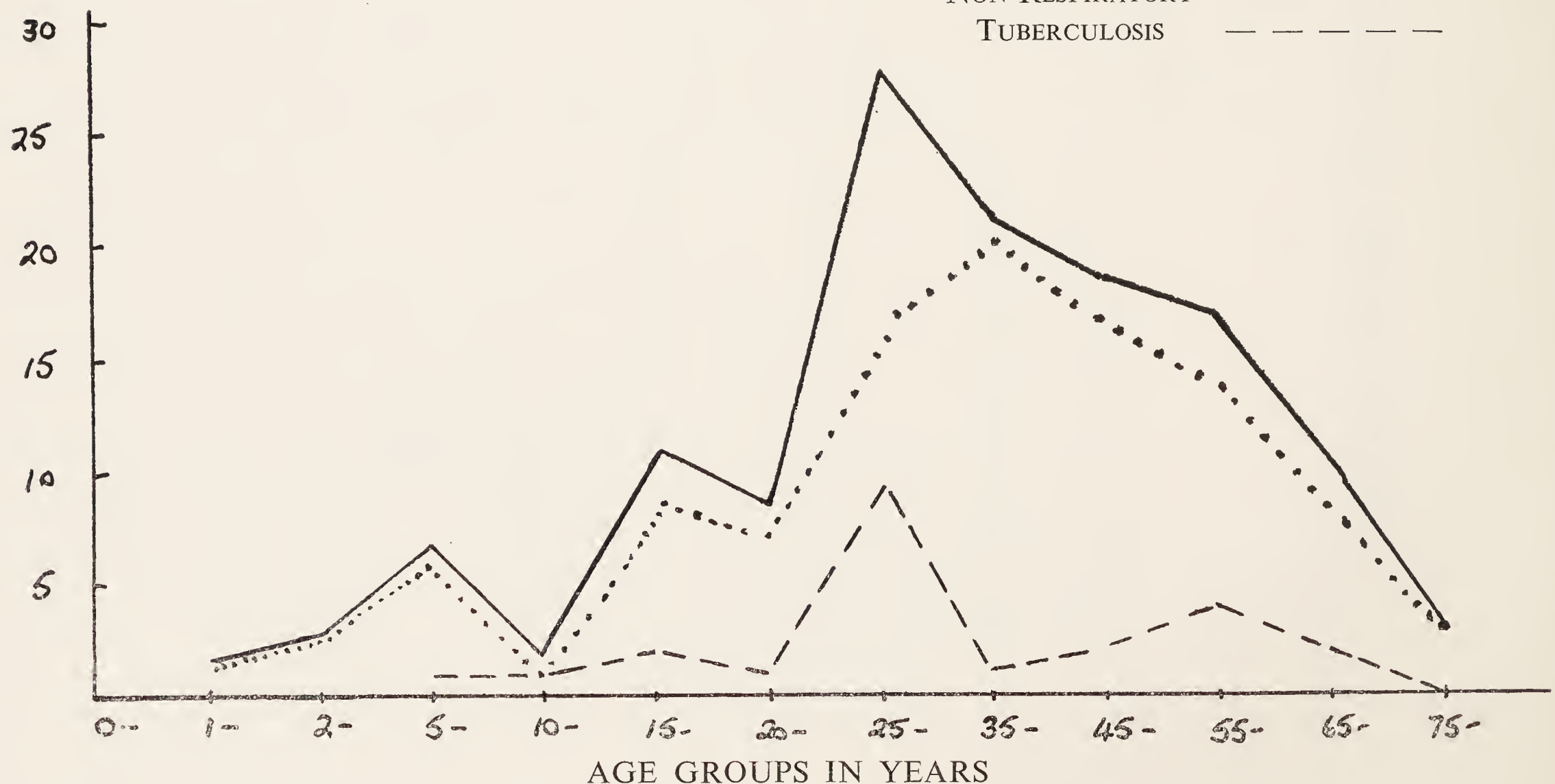
In 1963 the number of primary notifications of respiratory tuberculosis was slightly above the record low figure for 1962, but a substantial drop in the number of non-respiratory notifications resulted in a slight decrease in the total primary notifications of all forms of tuberculosis. The total number of primary notifications, and the incidence rate for all forms of tuberculosis, is the lowest ever recorded.

In addition to the 132 primary notifications, 27 other cases of tuberculosis were reported. Twenty-one were notified as transfers into Wiltshire from other counties, information regarding 5 cases who escaped notification during life was discovered from the death returns received from the District Registrars, and one was formally notified after death.

Primary notifications according to age groups are shown in the following graph. The majority of notifications of respiratory tuberculosis were in the 25-55 year age group, non-respiratory tuberculosis in the 25-35 year age group, and all forms of tuberculosis in the 25-65 year age group.

NUMBER OF PRIMARY  
NOTIFICATIONS 1963

ALL FORMS OF TUBERCULOSIS —————  
RESPIRATORY TUBERCULOSIS .....  
NON-RESPIRATORY  
TUBERCULOSIS - - - - -





In males there were 66 notifications of respiratory tuberculosis compared with 42 in females.

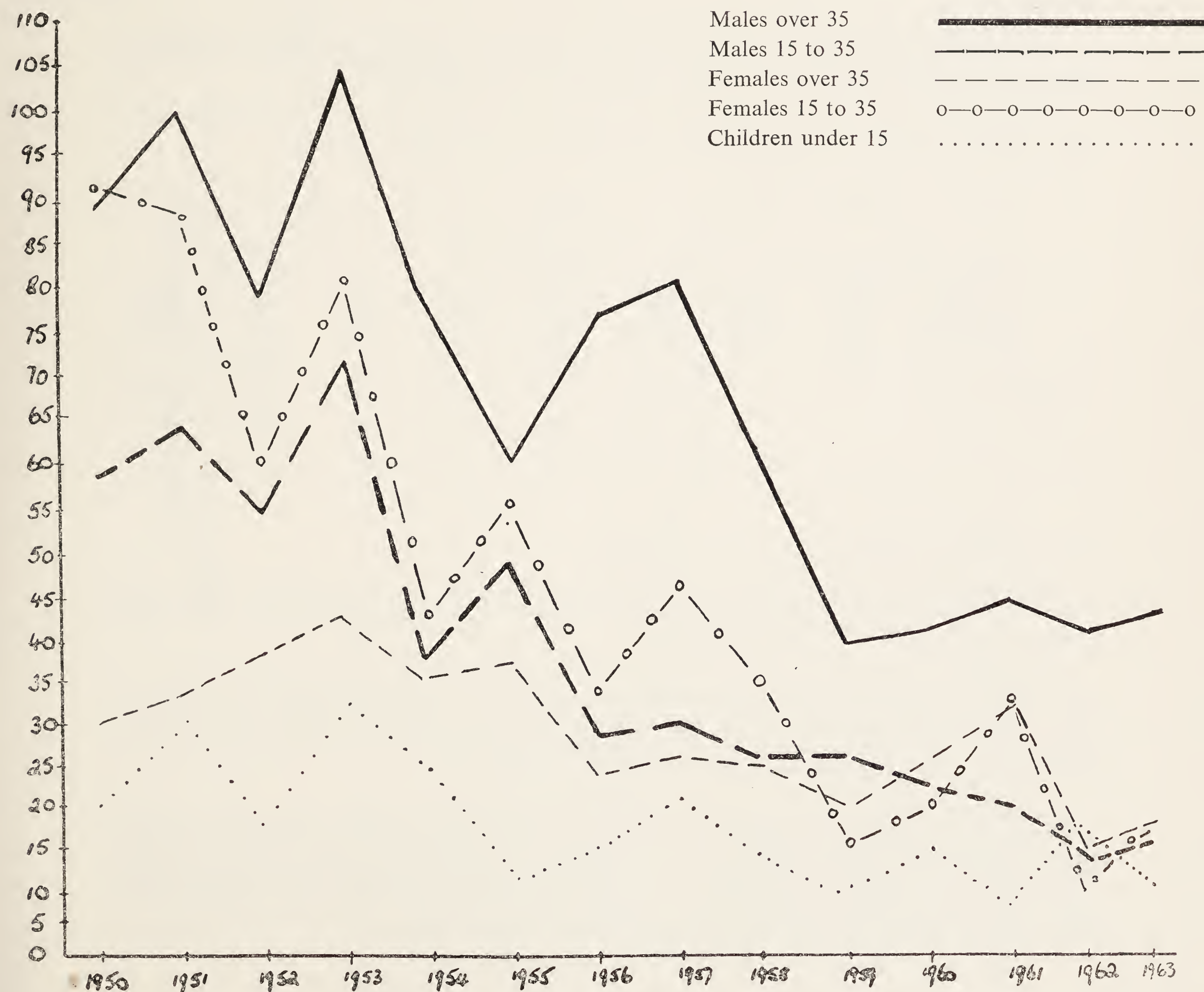
Between 1953 and 1963 notifications of respiratory tuberculosis have fallen from 329 to 108, a decrease of 67%, and non-respiratory tuberculosis from 49 to 24, a 51% decrease.

#### NOTIFICATIONS OF RESPIRATORY TUBERCULOSIS SINCE 1950 IN SELECTED AGE GROUPS

The following graph is repeated for its several interesting features.

#### NOTIFICATIONS OF RESPIRATORY TUBERCULOSIS SINCE 1950 IN SELECTED AGE GROUPS

Number of  
Primary  
Notifications



In 1962 a decline was noted in each of the selected age groups with the exception of children under 15. In 1963 the situation was completely reversed. A slight increase occurred in each age group with the exception of children under 15. The decline in the number of respiratory notifications in respect of children under 15 is welcome and tends to confirm the slow but general downward trend.

Between 1950 and 1963 a sharp decline is seen in males over 35, males 15-35 and females 15-35. The largest drop has occurred in the female age group 15-35 which showed the highest notifications in 1950 and the lowest in 1962.

A less rapid decline is seen in females over 35 and children under 15.

## DEATHS

The number of deaths from tuberculosis in 1963 was 20. The average for the last five years is 21. Ten of the deaths occurred in persons over 65 years of age, 8 in persons between 35-65, 2 in persons between 25-35. No persons under 25 years died from tuberculosis.

Deaths due to tuberculosis in 1963 and the corresponding death rates are shown in the following table, together with those for two previous years selected at five yearly intervals.

Year	Wiltshire			Wiltshire			England and Wales		
	Number of Deaths			Death rate per 1,000 population			Death rate per 1,000 population		
	Respira- tory Tuber- culosis	Non- Respira- tory Tuber- culosis	Tuber- culosis (all forms)	Respira- tory Tuber- culosis	Non- Respira- tory Tuber- culosis	Tuber- culosis (all forms)	Respira- tory Tuber- culosis	Non- Respira- tory Tuber- culosis	Tuber- culosis (all forms)
1953	41	10	51	0.11	0.02	0.13	0.18	0.02	0.20
1958	24	1	25	0.060	0.002	0.062	0.09	0.01	0.10
1963	16	4	20	0.036	0.008	0.044	0.056	0.007	0.06

## HEALTH VISITING AND EXAMINATION OF CONTACTS

Health visitors made 1,874 visits to the homes of tuberculosis patients compared with 2,341 in the previous year. As the number of active cases remaining under supervision at the chest clinics decreases, the number of health visits will fall.

The follow up of family contacts of tuberculosis continued to be an important feature of case finding. No effort is spared in preventing any contact from escaping examination at the chest clinic. Although the number of notifications was slightly less in 1963 the number of new contacts examined per notified case was higher, 6.1 compared with 5.4 in 1962. The number of cases of tuberculosis discovered in new contacts was the same, namely 11.

In addition to the 11 new contacts diagnosed as tuberculous, 6 other contacts who had been under supervision in previous years were found to have tuberculosis, making a total of 17 contacts notified as tuberculous, representing 13% of the primary notifications for 1963. It will be seen that ten years ago, when primary notifications were more than double the total for 1963, contacts represented 12% of the primary notifications. Although the total number of primary notifications has fallen, the percentage represented by contacts remains almost the same.

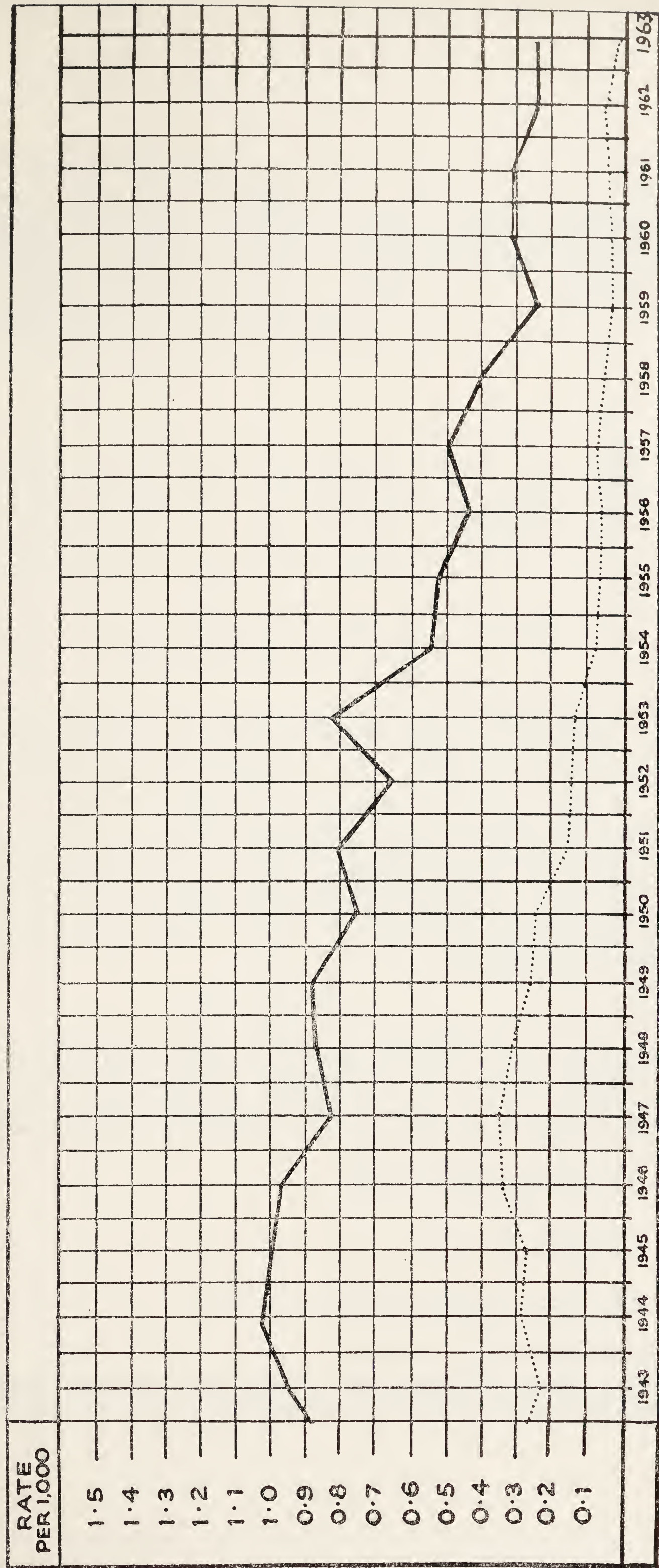


# RESPIRATORY TUBERCULOSIS

## NOTIFICATION AND DEATH RATES, 1943-1963

### WILTSHIRE

— Notification rate per 1,000 population  
 ..... Death rate per 1,000 population





Year	Primary Notifications (Respiratory and Non-Respiratory Tuberculosis)	Contacts examined for first time in the year	New Contacts examined per notified case	New Contacts diagnosed as suffering from tuberculosis (included in figures under column 2)	Percentage of new contacts examined found to be tuberculous	Contacts found to be tuberculous although under supervision in previous years	Total of new and old contacts found to be tuberculous	New and old contacts found to be tuberculous shown as percentage of Primary Notifications
1953	378	776	2.0	34	4.4	22	56	15 %
1954	307	726	2.4	19	2.6	17	36	12 %
1955	250	815	3.2	16	2.0	15	31	12 %
1956	208	907	4.4	26	2.9	23	49	23 %
1957	242	884	3.6	12	1.4	16	28	12 %
1958	203	856	4.2	11	1.3	14	25	12 %
1959	148	901	6.1	19	2.1	9	28	19 %
1960	165	740	4.5	15	2.0	8	23	14 %
1961	168	1,055	6.2	20	2.0	7	27	16 %
1962	139	756	5.4	11	1.5	8	19	14 %
1963	132	809	6.1	11	1.4	6	17	13 %

When considered necessary the work contacts of tuberculous patients who have a positive sputum are followed up. For example, sixteen work contacts of a patient employed as a chef at a Wiltshire hotel, who was found in 1963 to be suffering from pulmonary tuberculosis with a positive sputum, were approached by the District Medical Officer of Health, and arrangements made for chest x-rays at the nearest hospital. Pulmonary tuberculosis was discovered in one contact, and x-rays in two others were not satisfactory. Subsequent follow up examinations at the chest clinic revealed no further evidence of tuberculosis in the ten who attended. Information was also passed to the Medical Officer of Health of the places where the patient worked during late 1961 and 1962 before coming to Wiltshire, so that any action considered necessary might be taken by them in connection with following up close work contacts. Relatives living outside of the County were also followed up in this way.

## HOUSING

The number of tuberculosis patients waiting to be rehoused at the end of 1962 was 26. During 1963 new applications, which were supported by a certificate from the Chest Physicians, were received from 24, making a total of 50 requiring better accommodation. During 1963 7 withdrew their applications and 22 were rehoused, leaving 21 at the end of the year remaining to be rehoused. This is the lowest number of tuberculosis patients awaiting rehousing at the end of any year since 1949.

Certificates issued since 1949	...	...	...	...	...	...	811
Applications withdrawn, etc.	...	...	...	...	...	...	217
Required rehousing	...	...	...	...	...	...	594
Rehoused	...	...	...	...	...	...	573
Remaining to be rehoused at the end of 1963	...	...	...	...	...	...	21

## DIVERSIONAL THERAPY AND FREE MILK

During the year 16 patients were provided with interesting occupation while undergoing treatment at home under the diversional therapy scheme, and 14 received free supplies of milk.



## PROTECTION OF CHILDREN FROM TUBERCULOSIS

A satisfactory report of a chest x-ray was required from 42 persons prior to confirmation of appointment under the County Council during 1963 in accordance with the recommendations of the Ministry of Health circular 64/50 which advises that no person whose work brings them into close contact with groups of children should be employed without a satisfactory chest x-ray report.

Liaison with the Children's Officer continued throughout the year in order to prevent the possibility of a child being placed in prospective foster homes where there may be known tuberculosis infection.

## TUBERCULOSIS IN SCHOOLS

Eleven notifications of tuberculosis (10 respiratory and 1 non-respiratory) in Wiltshire school children were received during the year compared with 15 in the previous year. Eight of these children were contacts of known cases of tuberculosis in the family but in the remaining 3 the source of infection was not known. Seven are continuing supervision at the chest clinics, but the remaining 4 were notified from various hospitals and are still undergoing inpatient treatment. Arrangements for their follow up treatment and supervision will be made on discharge.

As tuberculosis declines it is expected that the percentage of positive reactions to the routine tuberculin test of 13 year old school children will fall. In Wiltshire the percentage of positive reactions in this group has fallen from 36.8 % in 1955 to 25.5 % in 1963.

Seventy-two 13 year old children, who had strong reaction to the tuberculin test at school, preliminary to B.C.G. immunisation, were referred to the chest clinic for further investigation, but no case of tuberculosis was found.

## B.C.G. IMMUNISATION.

The following table shows the number immunised with the exception of school children who are reported on separately on page 37.

	1963				From commencement of Scheme to 31.12.63
	Number Immunised				Number Immunised
(a) Contacts of tuberculosis ... ..				516	5,132
(b) Hospital staff ... ..				38	1,248
TOTALS ... ..				554	6,380

## MASS RADIOGRAPHY

Details of places visited, and numbers x-rayed by the mass radiography service, together with an analysis of conditions found amongst cases referred to the chest clinics are as follows:—

## MINIATURE MASS RADIOGRAPHY (35 mm UNITS)

Area	Persons previously Mass X-rayed	Persons Mass X-rayed for first time	Total	Referred to Chest Physician
Trowbridge ... ..	561	159	720	2
Warminster and Westbury ...	2,093	700	2,793	7
Dilton Marsh ... ..	76	24	100	—
West Lavington ... ..	128	347	475	—
Calne and Chippenham ...	90	107	197	—
Devizes ... ..	62	65	127	3
Mere, Tisbury, Salisbury and Wilton... ..	4,998	4,726	9,724	5
Industrial centres in Wilton and Downton ... ..	196	81	277	—
Roundway Hospital ... ..	722	214	936	9
Old Manor Hospital, Salisbury	143	35	178	—
Victoria Hospital, Swindon ...	112	119	231	—
St. Margaret's Hospital, Swindon ... ..	73	124	197	—
Princess Margaret's Hospital, Swindon ... ..	102	51	153	—
TOTALS ... ..	9,356	6,752	16,108	26

*Analysis of cases referred to Chest Physicians*

Active respiratory tuberculosis ... ..	2	}	3
Inactive respiratory tuberculosis ... ..	1		
Carcinoma of Bronchus ... ..			3
Other non tuberculous chest conditions ... ..			16
N.A.D. ... ..			4
			—
	Total		26
			—

## MOBILE 100 MM ODELCA UNITS

	<i>Attendances</i>	<i>Referred to Chest Physician</i>
Highworth ... ..	338	6
Ludgershall ... ..	203	6
Salisbury ... ..	1,908	22
Wootton Bassett ... ..	464	22
Cricklade ... ..	18	—
	—	—
	2,931	56
	—	—



*Analysis of Cases Referred to Chest Physicians*

Active respiratory tuberculosis	...	...	...	...	...	4	} 10
Inactive respiratory tuberculosis	...	...	...	...	...	6	
Carcinoma of Bronchus	...	...	...	...	...	9	
Carcinoma of gland of the neck	...	...	...	...	...	1	
Other non tuberculous chest conditions	...	...	...	...	...	32	
N.A.D.	...	...	...	...	...	4	
						Total	56

It will be seen that although the number of persons examined by the Odelca units was less than a third of the number examined by ordinary mass radiography, the number of cases of tuberculosis and carcinoma of the bronchus discovered by the Odelca units was three times greater.

The discovery rate of active tuberculosis amongst cases x-rayed by the ordinary mass radiography units was 0.12 per thousand x-rayed, and including inactive tuberculosis, 0.19. Amongst persons x-rayed by the Odelca units the active tuberculosis discovery rate was 1.4 per thousand x-rayed, and including inactive tuberculosis, 3.4. The highest discovery rate of active tuberculosis in persons x-rayed in Wiltshire by the miniature mass radiography units was 3.2 in 1951. This rate has dropped to below one per thousand x-rayed since 1959.

If the value of chest x-ray by the mass radiography service is measured in terms of the discovery rate of tuberculosis and carcinoma of lung it is clear that it is shifting from the mass miniature radiography of large numbers of the general public at long intervals, to the more selective examination of patients sent by general practitioners to the weekly sessions of the Mobile Odelca units. At present these are operating at Salisbury, Highworth, Wootton Bassett and Ludgershall but are likely to be introduced at several towns in west Wiltshire in 1964.

## CASES OF TUBERCULOSIS REMAINING ON CLINIC REGISTERS

Constant review of the clinic registers is maintained. The number of notified tuberculosis patients remaining on the clinic registers at the end of the year dropped from 1,739 in 1962 to 1,649 in 1963.

This figure relates only to notified cases. Many patients who, although they have been officially classified as recovered, and others whose disease has never reached the active stage, are not included in the foregoing figures but attend the clinic for observation in case of relapse or activation of their disease. At the end of the year these patients totalled 1,150.

Year	Notified tuberculosis cases remaining on Clinic Register			Number of patients sputum positive during the last six months of the year	Visits made by health visitors
	Respiratory	Non-Respiratory	Total		
1953	1,618	297	1,915	101	1,214
1958	2,020	277	2,297	Number of patients who remained sputum positive despite chemotherapy 30	2,187
1963	1,452	197	1,649	13	1,874

## INFECTIOUS CASES OF TUBERCULOSIS

During 1963, 24 new patients found to be suffering from tuberculosis were sputum positive and 26 old tuberculosis patients had a positive sputum, making a total of 50 patients who were sputum



positive during the year compared with 48 in the previous year. One new case was added to the drug resistance register during the year, but owing to death of 4 cases, removal to another County of one, and the successful treatment of 5 cases, the number remaining on the drug resistance register at the end of the year was reduced from 22 in 1962 to 13 in 1963.

#### CHEST CLINIC ATTENDANCES

The number of new patients attending the chest clinic shows no sign of falling off. As many new patients were seen in 1963 as were seen ten years ago. This continuing high number of new patients is accounted for by the large amount of follow up work in connection with tuberculosis contacts and B.C.G. vaccinations, and the increasing number of non-tuberculous chest conditions referred to the clinics.

The total chest clinic attendances, however, fell from 18,658 in 1962 to 17,194 in 1963, a drop of 8%. This decline is due mainly to the reduction in the number of active tuberculosis cases remaining on the clinic registers and the need for less frequent supervision.

#### HOSPITAL TREATMENT

On 1st January, 1963, there were 65 tuberculosis patients in hospital and 181 admissions were arranged during the year making a total of 246 who received in-patient treatment for tuberculosis during 1963. Treatment for tuberculosis is arranged in the main at Harnwood Hospital, Salisbury, Winsley Chest Hospital and Swindon Isolation Hospital. Approximately the same number of patients from the chest clinics received in-patient treatment for other non-tuberculous chest conditions.

The situation now is very different from that which existed at the time of introduction of the National Health Service Act when there was a shortage of beds for tuberculosis, and long waiting lists, and treatment of the majority of non-tuberculous chest cases was dealt with at general hospitals. Now there is virtually no waiting period for tuberculosis and beds are also available for non-tuberculous chest cases in the three main chest hospitals.

A good liaison exists with the three surgical centres at Frenchay Hospital, Bristol, Churchill Hospital, Oxford, and the Southampton Chest Hospital where the majority of Wiltshire patients requiring thoracic surgery are sent. In 1963, 110 persons were referred to the thoracic surgeons for confirmation of diagnosis and 99 were subsequently admitted for investigation and treatment. Sixty-four of these were suffering from carcinoma of the lung.

#### GENERAL COMMENT

Satisfactory evidences of the continuing gradual decline in tuberculosis in 1963 are seen in the reduction of primary notifications, deaths, and the number remaining on the clinic registers at the end of the year.

The volume of known tuberculosis in the County can be measured mainly by the notified cases on the chest clinic registers. In Wiltshire, 1,649 cases remained on the clinic registers at the end of 1963, representing a tuberculosis population of four per thousand approximately.

Although notifications are declining, attention is drawn to the fact that in 1963, 50 persons in Wiltshire had a positive sputum. Fortunately treatment usually makes this negative, and at the end of the year there were only 13 resistant to the modern drugs, but as long as sputum positive cases occur, the problem of infection remains. Careful follow up of positive sputum cases is of greatest importance for the public safety.

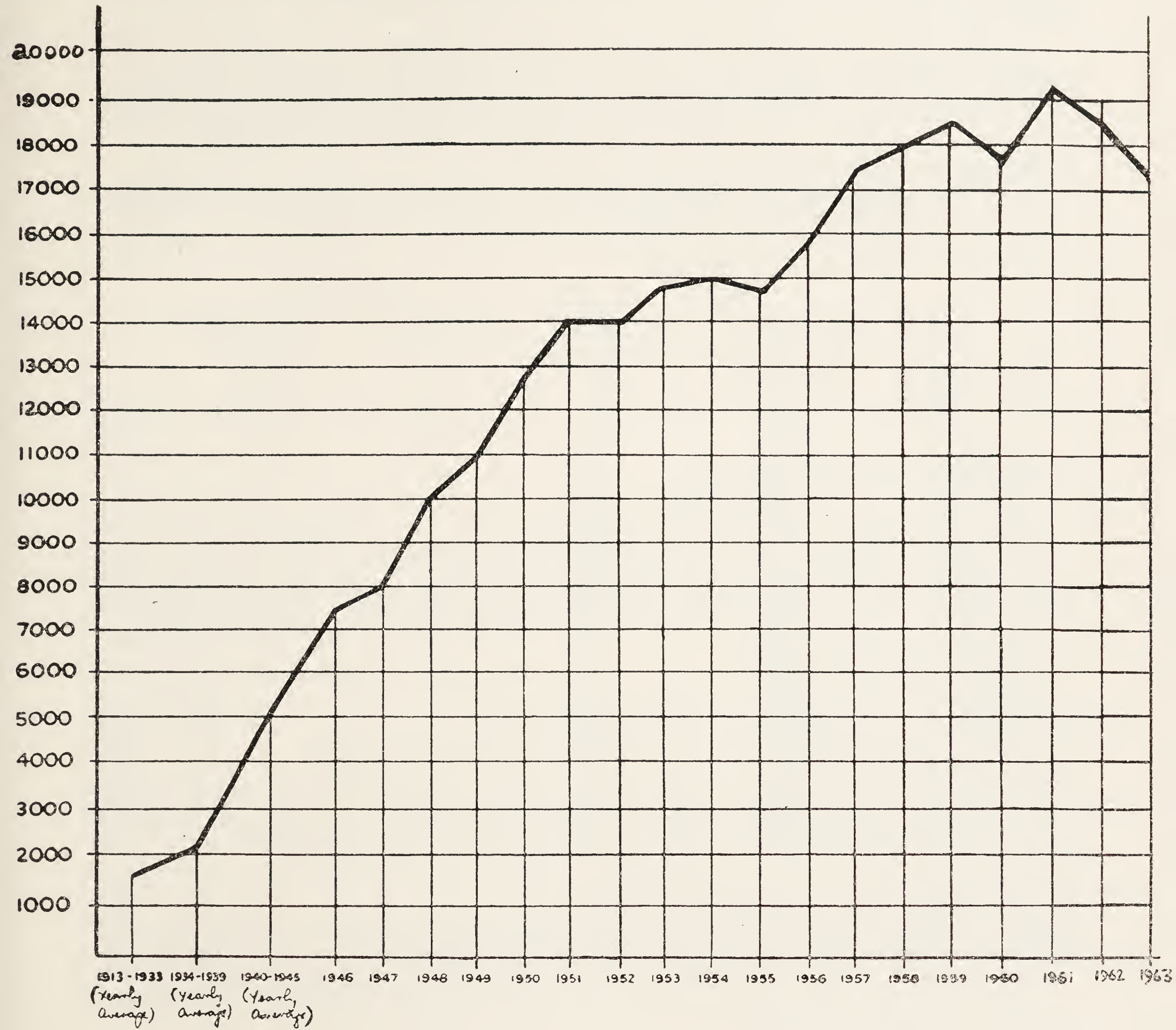
The World Health Organisation recently advocated a criterion that unless the number of children who become infected before the age of 14 years falls below 1%, tuberculosis cannot be considered to be eliminated as a public health problem. In Wiltshire, the tuberculin positive rate for 13 year old children in 1963 was 25.5% and it is necessary to repeat that tuberculosis remains a communicable disease and is likely to continue a public health concern for some time.



## WILTSHIRE CHEST CLINICS

ANNUAL ATTENDANCES

1913—1963

Number  
of  
Attendances

## \* *Miscellaneous Services*

### \*CHRONIC SICK BEDS

During the year the Salisbury Group Hospital Management Committee referred 107 cases for investigation. In 41 priority of admission was recommended and in many of the remainder the patient was assisted with domestic help or home nursing.

### \*REGISTRATION OF NURSING HOMES

No new nursing home was registered during the year but one ceased to operate as a nursing home. At the end of the year there were on the register seven homes, providing 4 maternity and 85 other beds.

The Nursing Homes Act, 1963, empowered the Minister of Health to make regulations as to the conduct of nursing homes and these, (The Conduct of Nursing Homes Regulations, 1963), became operative on the 27th August giving Registration authorities powers to restrict the numbers of persons who may be received into a home; managers of a nursing home must provide an efficient standard of nursing care as well as adequate accommodation and other specified facilities.

### \*NURSERIES AND CHILD MINDERS REGULATIONS ACT, 1948

Seven nurseries are registered at present under this Act, providing for a total of 126 children. Twenty-seven daily minders are registered, taking a maximum of 232 children in all.

In recent years there has been a marked increase in the number of applications for registration under this Act, as the following table shows:—

<i>Year</i>	<i>Nurseries</i>		<i>Child Minders</i>	
	<i>No. registered at end of year</i>	<i>No. of children provided for</i>	<i>No. registered at end of year</i>	<i>No. of children provided for</i>
1960	—	—	11	90
1961	2	38	12	80
1962	2	38	22	178
1963	7	126	27	232

### \*REGISTRATION OF NURSING AGENCIES

One nursing agency was registered in December.

### REGISTRATION OF BLIND AND PARTIALLY SIGHTED PERSONS

The register of blind and partially sighted persons is maintained by the Welfare Department, but, where necessary, arrangements for examinations by ophthalmologists continue to be made by the Health Department, to which reports in all cases are submitted. During the year reports were obtained on 111 persons. Seventy-eight were newly certified as blind and 33 as partially sighted.

### EXAMINATION OF MEDICAL REPORTS

The following table shows the number of medical examination reports received during 1963 (1962 figures shown in brackets):—

Number of medical examinations for entrants to Fire Service ... ..	34	(41)
Number of medical examinations for permanent posts in school meals service ...	129	(84)
Number of medical examinations for temporary posts in school meals service ...	35	(25)
Number of medical examinations for superannuable posts in school meals service ...	5	(6)
Number of medical examinations for other entrants to County Service ... ..	339	(412)
Number of medical examinations for fitness to return to duty in school meals service	35	(15)
Number of cases dealt with in connection with prolonged illness and breakdown pensions ... ..	25	(31)
Number of cases dealt with regarding fitness to drive ... ..	31	(33)
Number of medical examinations carried out for other counties ... ..	24	(28)
Number of medical examinations carried out for West Wilts Water Board ... ..	10	(14)
Total ... ..	667	

Where necessary any points of doubt have been followed up with the doctor concerned and specialist examinations arranged.

### ADOPTION ACT, 1958

Medical opinions are given on confidential medical reports received under this Act, 42 requests being received in 1963.

\*Statistics in this section exclude the Borough of Swindon, for which information will be found in the extract from the Borough Medical Officer of Health's Report.



# Sanitary Circumstances of the County

## WATER SUPPLY

The water sources of the County were stretched during 1963, particularly after the thaw following the winter freeze, when millions of gallons of water were wasted through burst mains and service pipes.

During the year seven water schemes were submitted to the County Council for observations under the Water Supplies and Sewerage Act, 1944. These were mainly for the improvement of existing supplies and replacement of unsatisfactory private supplies.

The provision of piped water supplies has now been completed in the majority of rural districts in Wiltshire, and schemes are well advanced in the remainder. A review of the progress made in providing piped supplies to houses during the period 1948-1962 is given in Table 1.

TABLE I

Rural District	Year Ending 31st December	Percentage of houses served by public water mains	Percentage of houses served by private water mains
Amesbury ... ..	1948	40.00	3.30
	1962	86.32	9.13
Bradford and Melksham ... ..	1948	63.70	20.00
	1962	92.80	not known
Calne and Chippenham ... ..	1948	46.00	not known
	1962	95.00	not known
Cricklade and Wootton Bassett ... ..	1948	81.64	1.17
	1962	97.00	1.30
Devizes ... ..	1948	32.00	7.00
	1962	87.50	10.00
Highworth ... ..	1948	65.00	20.00
	1962	96.74	2.80
Marlborough and Ramsbury ... ..	1948	27.00	30.00
	1962	65.81	32.81
Malmesbury ... ..	1948	51.00	8.00
	1962	95.00	4.00
Mere and Tisbury ... ..	1948	54.00	8.00
	1962	79.00	9.00
Pewsey ... ..	1948	20.00	—
	1962	68.00	20.00
Salisbury and Wilton ... ..	1948	15.00	30.0
	1962	80.00	17.0
Warminster and Westbury ... ..	1948	38.60	24.1
	1962	73.30	21.4

Agreement was reached during the year between the districts of Salisbury City, Wilton Borough, and the rural districts of Pewsey, Amesbury and Salisbury and Wilton, to form a water board by the amalgamation of their respective water undertakings, and a draft order is now in course of preparation for Ministry approval.

Bradford Urban District have also decided to join the North Wilts Water Board instead of linking up with Bath Corporation.

These decisions will complete the regrouping of all the Wiltshire water undertakings into four water authorities as recommended by the County Council in 1956.

The Water Resources Act, 1963, which was passed in July, 1963, provided for the establishment of a Water Resources Board, and the transformation of river boards into river authorities with the object of conserving and making proper use of the water resources of the country.

As far as Wiltshire is concerned, the present Avon and Dorset River Board and the Bristol Avon River Board will retain their same areas when they come into being as river authorities on the appointed day, probably the 1st October, 1964.

## SEWERAGE

During the year eight sewerage schemes were submitted by district councils under the Water Supplies and Sewerage Acts, 1944-1961. Eight schemes were in progress and seven others were completed as shown in Table II.

TABLE II

District	Sewerage Scheme	Estimated Cost		
		Approved during year	In Progress during year	Completed during year
		£	£	£
Amesbury ... ..	Figheidean and Milston ... ..			34,130
Bradford and Melksham	Westwood ... ..		24,000	
	Broughton Gifford ... ..		35,720	
	Shaw and Whitley ... ..	61,000		
Calne & Chippenham ...	Derry Hill and Studley ... ..			39,600
	Box—Stage II ... ..			21,700
	Box—Stage III ... ..		31,200	
	Corsham (Pickwick) ... ..	2,200		
	Calne Without ... ..		2,400	
	Mile Elm, Stage I ... ..	3,560		
	Calne Without—... ..			
Cricklade & Wootton Bassett	Mile Elm Stage II ... ..			
	Lydiard Millicent ... ..	101,000		
Devizes ... ..	Potterne Stage III ... ..			32,900
	Poulshot, Worton and Marston ... ..	94,150		
	Seend (Sells Green) ... ..	11,000		
Highworth ... ..	Blunsdon ... ..		23,000	
Marlborough and Ramsbury	Baydon, Grafton, Froxfield, Shalbourne and Chilton Foliat		265,000	
Malmesbury ... ..	Somerfords ... ..			97,530
	St. Paul Without ... ..			48,000
Pewsey ... ..	Netheravon and Fittleton ... ..		135,395	
Salisbury and Wilton ...	Alderbury ... ..	158,930		
	Barford St. Martin (Extension) ... ..			1,100
	Wishford and South Newton ... ..		93,000	
Warminster and Westbury	Southwick ... ..	75,000		



Table III shows the percentage of houses in each of the twelve rural districts provided with main drainage either by public sewerage schemes or by septic tanks at the end of 1948 compared with the position at the end of 1962.

TABLE III

Rural District	Year Ending 31st December	Percentage of houses drained to public sewers	Percentage of houses drained to septic tanks
Amesbury ... ..	1948	16.00	28.30
	1962	48.11	36.60
Bradford and Melksham ... ..	1948	23.30	not known
	1962	44.00	10.00
Calne and Chippenham ... ..	1948	15.00	8.00
	1962	59.70	15.50
Cricklade and Wootton Bassett ... ..	1948	42.65	24.17
	1962	56.30	28.40
Devizes ... ..	1948	NIL	32.00
	1962	50.00	40.00
Highworth ... ..	1948	68.00	not known
	1962	86.50	9.90
Marlborough and Ramsbury ... ..	1948	NIL	18.00
	1962	26.18	34.61
Malmesbury ... ..	1948	10.00	30.00
	1962	25.00	50.00
Mere and Tisbury ... ..	1948	22.00	15.00
	1962	34.00	39.00
Pewsey ... ..	1948	9.00	not known
	1962	54.10	38.10
Salisbury and Wilton ... ..	1948	5.25	10.00
	1962	20.00	70.00
Warminster and Westbury ... ..	1948	8.20	not known
	1962	17.90	37.30

The Offices, Shops, and Railway Premises Act, 1963, which came into operation in February last, is intended to raise the standards of working conditions in offices, shops and railway premises, and for the first time extends these principles of health and welfare into new fields of non-industrial employment.

The general provisions of the Act include matters relating to overcrowding, light and ventilation, sanitary and washing facilities, temperature, eating facilities, noise and vibration, cleanliness and fire precautions.

The Act does not apply to premises where self-employed persons work, neither does it apply if the total time worked is less than twenty-one hours a week. Enforcement is divided between three authorities. The Ministry of Labour (Factory Inspectorate) will cover all railway premises, factories, and local authority premises including police and fire authority premises. Fire authorities will administer fire precautions except in those premises assigned to the Factory Inspectorate. Local authorities will be responsible for all remaining premises which are shops or offices, and all local authorities are required to submit annually to the Minister a report of their proceedings under the Act.

## HOUSING

There were no significant changes in housing legislation during 1963. The Housing Acts 1957 and 1961 remain the principal acts dealing with housing administration.

Improvement grants and other housing statistics for 1963 are given in appendix A.

## THE POLLUTION OF LAY-BYS IN WILTSHIRE

A survey of lay-bys on Wiltshire main roads during the summer of 1963 confirmed that public nuisances are committed at many lay-bys and other places where motorists stop. The problem grows worse as the volume of traffic using the roads increases, and is aggravated by the fact that as the number of motorists increases, so does the congestion in towns, which makes it more difficult to stop there in order to use existing public conveniences.

The remedy for this problem with its dangers to health is the provision of public conveniences at intervals along main roads, sited where possible on the outskirts of towns and villages where water and sewerage systems are available. Provision is also needed at one or two sites for caravanners to stop overnight.



## *Supervision of Milk and Food*

Number of Wiltshire dairy farms	...	...	...	...	2,454
Number of Wiltshire T.T. Designated dairy farms	...	...	...	...	2,416
Number of Wiltshire non-Designated dairy farms	...	...	...	...	38
Number of producer retailers	...	...	...	...	93
Number of retail distributors	...	...	...	...	142
Number of pasteurising plants	...	...	...	...	8

Minor changes in milk control were introduced during the year as a result of the Milk (Special Designation) Regulations, 1963, which changes the designation under which raw milk may be sold. This change results from the success of the animal health policy of eradicating tuberculosis from cows, making it no longer necessary for the consumer to pay extra for the benefit of obtaining tuberculin tested milk. Under the new 1963 Regulations the present title of "tuberculin tested" will be replaced by the designation "UNTREATED" for raw milk from the 1st October, 1964. The description "Tuberculin Tested Pasteurised" also ceases, so that the only designations under which milk may be sold will be (a) "UNTREATED" (b) "PASTEURISED" and (c) "STERILISED" with no difference in the retail price of raw and pasteurised milk to the consumer.

The new regulations will not affect the system of supervision and control delegated to district councils in 1960, as all three grades of milk will still need sampling, although there will be some reduction in the sampling of heat-treated milks.

Under this delegated milk scheme, district councils agreed to carry out licensing, inspection and sampling in their respective areas and to make quarterly returns of work done to the County Council.

Returns of inspection and sampling during 1963 showed a marked improvement over the previous year, and suggested that on the whole milk supervision was adequately carried out in Wiltshire. The number of samples taken by districts during 1963 and the laboratory results are summarised in the following table:—

Type of Milk Sample	Estimated Annual Sampling Target	No. of Samples Examined	Laboratory Results		Percentage of Samples Failing
			Pass	Fail	
Raw Milk (Statutory Test) ... ..	1,173	1,283	1,162	121	9.44
Raw Milk (Biological Test) ... ..	408	1,093	1,082	11	1.01
Heat Treated Milk (Statutory Test)...	2,153	2,275	2,183	92	4.04
	3,734	4,651	4,427	224	4.81

### ANTIBIOTICS IN MILK

A report published in 1963 on antibiotics in milk in Great Britain drew attention to another public health risk in connection with milk. This report prepared by the Milk Hygiene Sub-Committee of the Milk and Milk Products Technical Advisory Committee to the Ministry of Agriculture, Fisheries and Food, followed a survey of farm milks, when 11 per cent of 41,700 milk samples examined were found to contain antibiotics.

Some of the antibiotics given to cows for the treatment of mastitis pass into the milk for a period, but not all producers comply with the Milk Marketing Board's contract requiring them to withhold from sale milk from cows recently treated with antibiotics.

Antibiotics in milk are a health hazard for several reasons. Firstly, some persons may become sensitive and react if therapeutic doses of the same drug are given later to combat infection. Secondly, there may be allergic reactions causing skin rashes, and thirdly, there is the danger that antibiotics in the milk may prevent a patient responding to treatment with similar antibiotics.

The report makes recommendations, including advice to farmers and veterinary surgeons, and advises food and drugs authorities to sample and test ex-farm milk for antibiotics and to take appropriate action.

In Wiltshire, which is such a large milk producing county, there is reason for concern about the danger to health which might arise from the consumption of milk containing antibiotics; the General Purposes Committee have instructed the Chief Inspector of Weights and Measures to carry out a sampling programme as recommended in the report. During 1963 the Weights and Measures Inspectors collected 243 milk samples for the presence of antibiotics and of these 33 or 13.5 per cent gave positive results.

I am indebted to the Chief Inspector of Weights and Measures for the following information concerning food and drugs administration during 1963.

### PARTICULARS OF PROSECUTIONS AND OTHER ACTION TAKEN IN RESPECT OF INFRINGEMENTS PROSECUTIONS

Trade	Offence	Act	Fine	Costs	Venue
			£ s. d.	£ s. d.	
Dairymen	False trade description applied to milk	Merchandise Marks Act, 1887	10 0 0	—	Devizes
	Having in possession for sale milk to which an addition of water had been made	Food & Drugs Act, 1955	5 0 0	4 0 0	
Butchers ...	Selling a pork pie which was mouldy	Food & Drugs Act, 1955	Dismissed		Warminster
Baker ...	Selling a bun containing a piece of wire	do.	10 0 0	—	Warminster
Butchers ...	Applying a false trade description to liver	Merchandise Marks Act, 1887	3 0 0	—	Devizes
Butchers ...	Exposing for sale liver to which a false trade description was applied (two charges)	do.	Convicted	Exempt from penalty	Chippenham
Butchers ...	Shop manager charged by employers as actual offender; also charged for applying the above false trade descriptions	Merchandise Marks Act, 1926	6 0 0	—	Melksham
		Merchandise Marks Act, 1887	20 0 0	—	
	Exposing for sale liver to which a false trade description was applied	do.	Convicted	Exempt from penalty	
	Shop manager charged by employers as actual offender; also charged for applying the above false trade description	Merchandise Marks Act, 1926	3 0 0	—	
		Merchandise Marks Act, 1887	10 0 0	—	



## OTHER ACTION

Nature of Alleged Offence	Written Caution	Attention drawn to irregularities, including verbal cautions	Referred to other Authority
Food (including milk) substandard ... ..	39*	16	32
Food—incorrectly labelled or advertised ... ..	4	17	4
Food—alleged misleading dietary claim ... ..	2	3	—
Food—containing foreign body ... ..	—	—	2
Milk—Special Designation—unlicensed use ... ..	2	—	3
Milk—overcharging ... ..	—	—	12
Milk—unsatisfactory labelling ... ..	1	2	2
Drug—substandard ... ..	1	—	—
Drug—incorrectly labelled ... ..	—	—	1

\*Includes 20 issued in respect of milk containing antibiotic residues

The County Council is the Food & Drugs Authority in all areas of the County outside the Borough of Swindon, and the undermentioned legislation is enforced by the County Council Weights and Measures Department with the object of ensuring that purchasers are supplied with pure and genuine foods and drugs:—

Food & Drugs Act, 1955  
Sale of Milk Regulations, 1939  
Pharmacy & Medicines Act, 1941  
Milk (Special Designations) (Specified Areas) Orders, 1955-58  
Milk & Dairies (Channel Islands & South Devon Milk) Regulations, 1956  
Labelling of Food Order, 1953-55  
Labelling of Food (Amendment) Regulations, 1958-61  
The Food Standards (General Provisions) Order, 1944  
The Food Standards Orders and Regulations, 1944-59  
The Flour (Composition) Regulations, 1956  
Public Health (Dried Milk) Regulations, 1923-48  
The Preservatives in Food Regulations, 1962  
The Condensed Milk Regulations, 1959  
The Colouring Matter in Food Regulations, 1957  
The Antioxidant in Food Regulations, 1958  
The Arsenic in Food Regulations, 1959-60  
The Fluorine in Food Regulations, 1959  
The Lead in Food Regulations, 1961  
The Emulsifiers & Stabilisers in Food Regulations, 1962  
Merchandise Marks Act, 1926, and Orders made thereunder

A total of 1,353 samples were purchased or taken in areas covering the whole County, steps being taken to obviate the duplication of samples to cover the greatest varieties of foods and to ensure compliance with the labelling and other requirements of the above-mentioned Orders and Regulations.

## RADIATION

A residential course on Radiation in Public Health and Civil Defence for public health inspectors was held at Urchfont Manor College of Adult Education from the 4th to the 8th November. The content of the course was in accordance with the recommendations of the Veale Committee. Twenty inspectors attended from Wiltshire, together with four from neighbouring local health authorities. Another similar course had been arranged for March, 1964, and in view of the success of the November course it is hoped to arrange others in the future on similar lines, to cater both for other inspectors in Wiltshire and for those from local health authorities further afield. It is felt that these courses will meet a need.



# APPENDIX A RURAL HOUSING STATISTICS FOR YEAR ENDING 31st DECEMBER, 1963

	Amesbury	Bradford and Melksham	Calne and Chippenham	Cricklade and Wootton Bassett	Devizes	Highworth	Malmesbury	Marlborough and Ramsbury	Mere and Tisbury	Pewsey	Salisbury and Wilton	Warminster and Westbury
1. Number of permanent dwellings in district at end of year ... ..	6,600	3,701	7,443	5,673	4,130	8,973	2,387	3,389	3,943	4,591	6,343	4,447
2. Number of permanent dwellings in district owned by local authority ... ..	1,347	670	1,495	1,117	944	1,793	534	618	715	1,280	901	611
3. Number of temporary dwellings in district owned by local authority ... ..	—	20	701	—	—	344	—	—	—	—	—	—
4. Number of applications for Council houses at end of year ... ..	583	200	376	389	450	341	175	151	204	400	411	—
5. <i>Inspection of dwellings during year:</i>												
(i) Number of dwellings inspected under Public Health or Housing Acts ... ..	146	25	68	88	69	1,039	305	560	247	134	153	164
(ii) Number of dwellings found to be unfit ... ..	75	25	6	57	8	12	2	71	74	78	62	27
6. Number of dwellings rendered fit in consequence of informal action... ..	33	8	21	25	12	10	55	66	48	65	49	60
7. <i>Action under Statutory Powers</i>												
A. <i>Proceedings under Sections 9, 10, 12 Housing Act, 1957:</i>												
(i) Number of dwellings where notices were served requiring defects to be remedied ... ..	—	—	—	—	—	—	—	—	—	—	—	—
(ii) Number of dwellings rendered fit after service of formal notices:												
(a) by owners ... ..	—	—	—	—	—	—	—	—	—	—	—	—
(b) by local authority in default of owners ... ..	—	—	5	—	—	—	—	—	—	—	—	—
B. <i>Proceedings under Public Health Acts:</i>												
(i) Number of dwellings where formal notices were served ... ..	5	—	5	—	1	—	—	—	—	2	—	—
(ii) Number of dwellings made fit as a result of formal notices ... ..	2	—	12	—	1	—	—	—	2	2	—	—
(a) by owners ... ..	2	—	4	—	1	—	—	—	—	2	—	—
(b) by local authority in default of owners ... ..	—	—	8	—	—	—	—	—	2	—	—	—
C. <i>Proceedings under Section 16, Housing Act, 1957:</i>												
(i) Number of Demolition Orders made ... ..	5	13	—	9	10	1	—	—	—	3	7	9
(ii) Number of dwellings demolished as a result of Demolition Orders ... ..	13	8	—	18	4	13	6	1	13	7	27	10
(iii) Number of undertakings accepted to make fit or not to re-let ... ..	—	—	—	4	—	4	1	—	3	6	6	3
(iv) Number of dwellings made fit as result of undertakings ... ..	—	2	—	2	—	4	1	—	3	13	4	1
D. <i>Proceedings under Sections 42, 43, 46, 48, Housing Act, 1957:</i>												
(i) Number of dwellings in clearance areas upon which Demolition Orders were made ... ..	—	—	—	—	—	—	—	—	—	—	—	—
(ii) Number of dwellings demolished as a result of Demolition Orders ... ..	—	—	—	—	3	—	—	—	—	—	—	—
(iii) Number of dwellings in clearance areas which have been retained as temporary accommodation ... ..	—	—	—	—	—	—	—	—	—	—	—	—
E. <i>Proceedings under Sections 17, 18, 27, Housing Act, 1957, and Section 26, Housing Act, 1961</i>												
(i) Number of dwellings where closing Orders were made ... ..	1	5	4	3	4	1	—	—	—	9	4	1
(ii) Number of dwellings closed as a result of closing Orders or undertakings by owners ... ..	1	5	8	5	3	5	—	—	1	9	4	—
F. <i>Proceedings under Section 76, Housing Act, 1957</i>												
(i) Number of cases of overcrowding at end of year ... ..	2	—	—	4	—	—	1	—	1	4	5	—
(ii) Number of cases of overcrowding discovered during year... ..	2	—	—	2	—	—	1	—	2	2	9	—
(iii) Number of cases of overcrowding abated during year ... ..	—	—	—	1	—	—	—	—	2	2	4	—
<i>Houses erected or converted during year:</i>												
Houses erected during year for slum clearance: Local Authority ... ..	—	—	125	6	—	—	2	2	1	13	—	20
„ „ „ „ „ „ „ „ for other purposes: Local Authority ... ..	—	—	129	12	5	57	7	9	37	21	13	—
„ „ „ „ „ „ „ „ Private Enterprise ... ..	108	3	192	148	24	662	48	73	22	35	15	88
Gained from conversion of large houses into flats or dwellings: Local Authority ... ..	—	—	—	—	—	—	—	—	—	—	—	—
„ „ „ „ „ „ „ „ Private Enterprise ... ..	1	—	4	—	5	—	—	—	2	2	5	2
Lost from conversion of two or more houses into one: Local Authority ... ..	—	—	—	—	—	—	—	—	—	—	—	—
„ „ „ „ „ „ „ „ Private Enterprise ... ..	2	1	5	1	3	—	—	2	5	7	5	2
<i>Improvement Grants made under Housing Acts, 1949-1961:</i>												
Value of grants made: Standard Grants ... ..	£778.5.2	£7,417	£5,184	£1,955	£6,195.3.10	£3,686	£1,380	£1,925	£3,129	£1,675	£3,594	£2,445.11.4
„ „ „ „ „ „ „ „ Discretionary Grants ... ..	£7,882.17.2	£1,091	£14,395	£5,882	£2,440	£2,662	£8,529	£5,686	£3,350	£16,085	£12,321	£11,638
Number of houses improved as result of: Standard Grants ... ..	8	23	40	19	17	33	12	14	22	14	28	18
„ „ „ „ „ „ „ „ Discretionary Grants ... ..	24	10	48	17	4	8	25	16	10	54	33	40













